19 1957



JOHN POWELL JR., LIVES TO TELL ABOUT IT — Nurse Superintendent Romaine Holmes at Lutheran Hospital, Baltimore, comforts 'miracle boy.'

Veterans Administration Reports Blood Pressure Drug

WASHINGTON, D. C. — Veterans Administration Tuesday reported the "marked effectiveness" of a new drug against high blood pressure, following an eight-months study with more than 100 patients.

Dr. Edward D. Freis of the VA hospital in Washington, D. C., said the clinical trials indicated combinations of a synthetic compound, chlorothiazide, with other drugs reduce blood pressure more effectively than any drugs generally used to treat the disease. Dr. Freis said older drugs produced reductions in blood pressure averaging 11 percent of the pre-treatment level, while combinations with chlorothiazide gave an average reduction of 27 percent.

Chlorothiadide is effective against high blood pressure when used alone, although generally not so effective as in combination, Dr. Freis said.

He said the strict limitation of table salt in diet, which has been followed in treatment of high blood pressure, does not appear necessary for patients receiving chlorothiazide, although moderate restriction still is desirable for the drug to exert its maximum effect.

Use of the new drug also tends to reduce unpleasant effects from other drugs, he said, since dosage of the older compounds can be reduced, and they may sometimes be eliminated when chlorothiazide is given.

Compounds tested in the VA study include reserpine, a tranquilizer; hydralazine, a powerful dilator of blood vessels; newer synthetic drugs that block transmission of nerve impulses to the blood vessels (pentolinium tartrate, chlorisondamine chloride, and mecamylamine hydrochloride), and Veratrum alkaloids, which affect nerve control centers to reduce blood pressure.

Assisting in the research were Dr. Annemarie Wanko and Dr. Ilse M. Wilson of Georgetown University Hospital and Dr. Alvin E. Parrish of the VA hospital.

Chlorothiazide was given by mouth to 105 patients, including 73 already receiving other drugs for high blood pressure, to an additional 10 previously untreated for the disease, and to five others who had undergone the nerve-cutting surgery, sympathectomy.

After addition of chlorothiazide for the group of 73, a prompt further reduction in blood pressure was recorded in 68 patients, reaching an average of 27 percent below pretreatment levels. Reductions in blood pressure after treatment with the various older drugs had varied from good to poor in this group Dr. Freis said.

8-YEAR-OLD GIVES BIRTH TO DAUGHTER

LIMA, Peru — (UP) — An 8-year-old Peruvian girl gave birth to a six-pound daughter in the city hospital here Monday.

The mother is Hilda Trujillo. Doctors said the birth was completely normal and that both mother and baby are doing well. A first cousin of Hilda, 21-year-old Teodoro Camilla Martel, is under arrest as the alleged father.

Camilla Martel lived in the same room with Hilda and her parents, peasants who came to Lima in search of work two years ago.

The case recalled that of another Peruvian girl, Lina Medja, who was 6¼ years old when she gave birth to a son in 1939.

Half girl, half boy is now girl

WASHINGTON — The case of an infant born half girl and half boy is reported in the July, 1957, issue of the Journal of the National Medical Association.

In a rare operation performed by surgeons of Freedmen's Hospital here, the child is now completely a girl.

Other cases have been known in which a human being was one-fourth male and three-fourths female or vice versa, but according to the Journal, medical history documents only 60 cases in which an individual is a perfect twin within himself.

The case recalled the operation performed in Sweden three years ago on a soldier, transforming him into a girl, who has become known as Christine Jorgensen.

* * *

PICTURES of the child before, during and after the transforming operation are printed in the Journal for the guidance of physicians.

The operation was completely successful and the child is now living a normal life, the report stated.

19 1957

Death Rate For Women Dropping

Post Herald
Jan 5-24-57

By Science Service

ST. LOUIS, Mo., May 23—The death rate for women is dropping considerably but for men it is staying about the same.

These are some of the results of a study of mortality among the industrial policyholders of the Metropolitan Life Insurance Co. covering 1950 to 1955, reported by E. A. Lew and Mortimer Spiegelman, of the company, to the Society of Actuaries meeting here today.

Birmingham, Ala.,

The study covers millions of persons and the mortality among this group is, in most respects, very much like that of the general population, the statisticians reported.

The overall death rate in 1955 was down 9 per cent from 1950 but the decrease for white males was insignificant. The two groups benefiting most were white females and non-whites, they said.

The top two killers are the cardiovascular-renal diseases and cancer. Without a major advance in their control, women will continue to enjoy a lowering death rate while the men's death rate will go down only very slowly, at best, they predicted.

Heart disease outranked all other causes of death after age 25, with the exception of white females between 25 and 44. There, cancer was the number one killer.

Accidents are the number one cause of death to all persons under 25, the statisticians reported. At ages one to four they account for one-fourth of all the deaths. From then on, up to age 25, they are responsible for almost half of all the white male deaths and one-fourth of all white female deaths.

Australia Finds Vaccine To Combat Flu Epidemic

Post & Times Herald P.18-A
Sun. 6-9-57
Washington D.C.

Reu

MELBOURNE, Australia, June 8—Australian scientists have developed a vaccine to combat an influenza epidemic sweeping the Far East from India to the Philippines.

The vaccine now is in mass production, Dr. P. L. Bazeley, director of the Commonwealth Serum Laboratories here, announced today.

The first issue of several thousand doses is expected to be available for general use in seven days.

Dr. Bazeley said Australia is the first country to produce the vaccine and has completed the task in what he believes is world record time. Australia received the flu virus from Singapore 20 days ago.

The disease has affected hundreds of thousands of people and resulted in several deaths since it first was reported in Japan last December. It has spread throughout nearly all Southeast Asia, by way of Communist China, Hongkong and Singapore.

Australia will make the vaccine available first to persons most susceptible to infection, such as guarantine officers, airport officials and hospital staffs. Later it will be released to the public, Dr. Bazeley said.

British and United States laboratories also are working on vaccine development. American labs have set a target of 9 million doses by August.

Cerebral Palsy Is Worst Crippler, Says Specialist

Times-Picayune Mon. 6-10-57

Now No. 1 Infantile Health Problem, He States

New Orleans, La,

Cerebral palsy is the worst crippler of children in the United States today, a cerebral palsy specialist said here Sunday.

Dr. Nicholson J. Eastman, chairman of the department of obstetrics, Johns Hopkins university, said the success of Salk vaccine in reducing incidence of polio has resulted in the emergence of cerebral palsy as the "number one" infantile health problem in the eyes of the public.

The physician, who is president of the American Academy for Cerebral Palsy, presided over a meeting of the academy's executive committee at the Roosevelt hotel, held in preparation for the organization's annual convention here Nov. 25, 26 and 27.

500,000 Afflicted

Dr. Eastman observed that there are presently some 500,000 persons in the US afflicted with cerebral palsy—a malady caused in most cases by brain damage suffered at birth.

"About one baby of every 200 born has cerebral palsy," he explained, "and the worst thing about it is that it is incurable."

The vast teams of rehabilitation workers in the academy's program, including many auxiliary workers in addition to the physicians—all of whom are specialists, are helping restore many of the less-severely handicapped victims to useful, productive lives, however, he said.

Physical Therapy

He said that by proper use of physical therapy equipment for exercising muscles, neuro-surgery, orthopedic treatment and other rehabilitation care between 25 and 30 per cent of cerebral palsy victims can be improved sufficiently to work and engage in other normal activity.

One of the main topics to be studied at the convention in November, Dr. Eastman continued, will be new developments in physical therapy and other rehabilitation techniques.

Dr. Eastman said there is a "growing awareness of cerebral palsy as a community problem" throughout the country. The federal government grants $3 million annually for care and treatment for cerebral palsy victims, the physician added.

"The National Institute of Health, recognizing the seriousness of the disease, has adopted cerebral palsy control as one of its major projects," he said, "and many hospitals are beginning to set up their own clinics (or schools) for rehabilitation of such patients."

Cripples Mind Also

He said the academy, whose members represent almost every field of medicine, has a special committee which makes studies and recommendations for instruction of school teachers and physicians to teach children with cerebral palsy.

Times-Picayune

"The tragedy about palsy," Dr. Eastman said, "is that—unlike polio—it cripples the mind as well as the body in most cases. We, therefore, must not only try to repair paralyzed muscles and limbs but correct mentally retarded minds."

Mon. 6-10-57

At the executive committee meeting, the members completed plans for convention, which will be highlighted by a panel discussion, to include illustrations with cerebral palsy victims and observations by the specialized physicians serving on the panel.

Dr. J. D. Russ, New Orleans, is chairman of local arrangements for the convention.

He said that the average yearly cost for caring for cerebral palsy cases under the current program is approximately $1500 per person.

A fund-raising campaign was launched here last week by the United Cerebral Palsy Association of the Greater New Orleans Area. Solicitations and collections will be made on July 1.

WOMAN'S ROLE IS CITED

Times P.1-C
Jun 6-11-57

Wellesley Commencement Is Told of Opportunities

Special to The New York Times.

WELLESLEY, Mass., June 10—The best opportunities for enjoying life belong to the woman who has been married ten years, the graduating class of Wellesley College was told today.

The appraisal was made by Edward Weeks, editor of The Atlantic Monthly, at the college's seventy-ninth commencement exercises.

He told the 363 graduating women they were "in the ascendancy" as they never had been before.

They have no option about housework and rearing of children in the first decade of marriage, he said, but in the second, freed from the task of supporting themselves, they have time to pursue their interests and aptitudes.



—Photo by The Times-Picayune.

DISCUSSING PLANS SUNDAY for the annual convention of the American Academy for Cerebral Palsy to be held here in November were members of the academy's executive committee. They are (from left) Dr. Alvin J. Ingram of the University of Tennessee medical school staff; Dr. Russell Meyer of the University of Iowa medical school; Dr. Nicholas J. Eastman, president of the academy, and Dr. Raymond R. Rembolt, director of the University of Iowa hospital. of Chevy Chase, Md., headed the editorial subcommittee.

The group said desegregation was not merely a legal problem "but a social, and above all, a psychological problem."

The report declared that "wherever segregation occurs there are damaging effects to the personality growth and development of the person discriminated against." But, it added, segregation practices also damage psychologically those who condone or foster them.

Separate Facilities

"Institution of separate schools for Negroes is both an expression of their lower cultural status and a factor in further depressing their economic and educational level as compared to whites," the report said.

The group asserted that segregated conditions contributed to high disease and death rates, some types of crime and delinquency, poor housing, substandard living and disorganized family life.

Those social ills, it continued, do not remain confined to segregated populations but inevitably lower the level of well-being for the entire community. The report said the maintenance of duplicate sets of "equal" but

SOCIAL ILLS LAID TO SEGREGATION

Times P.13-L
New York

Community Is Damaged by School Separation, Group of Psychiatrists Says

Times 5-16-57

A group of 250 psychiatrists and social scientists contended yesterday that school segregation caused psychological damage not only to the individuals affected but to the entire community as well.

The group made the statement in a report on the "Psychiatric Aspects of School Desegregation." It was prepared and published by the Group for the Advancement of Psychiatry, 1790 Broadway.

Dr. Dana L. Farnsworth, president of the organization, said the report was drafted by psychiatrists and social scientists working in an interracial committee and representing every region of the country. Dr. Viola Bernard of this city served as committee chairman and Dr. Mabel Cohen

separate health, welfare and educational services meant that the budget for each group must be lowered at the expense of the other.

In surveying communities where desegregation had taken place the group noted that fewer conflicts had developed where school boards, teachers and parent-teacher organizations had joined with political leaders to anticipate the problems of integration.

The report said problems arising out of desegregation required for their solution not only an understanding of the social situations in which those problems occurred but an insight into the complex emotional feelings, both hidden and obvious, that influenced attitudes toward those problems.

Communicable Death Rate From Disease Is Cut

Daily World Atlanta Ga. 7-M 4-26-57

NEW YORK, N. Y. —Developments in medicine and public health, together with a higher standard of living, have cut the communiable disease death rate in the U. S. by about 90 per cent since 1900, Health Information Foundation said Thursday.

The current issue of the Foundation's monthly bulletin, PROGRESS IN HEALTH Services, reports that three communicable-disease groups—pneumonia and influenza tuberculosis, and diarrhea and eteritis—caused nearly a third of all deaths in 1900. Last year, they were responisble for only one twentieth of all deaths.



Courier Sat. 6-22-57 Pittsburgh, Pa. 19 P3

Birthday Party—The famous Fultz quadruplets of Reidsville, N. C., prides and joys of the Pet Milk Company, join hands in slicing their 11th birthday cake. The girls described their party as "the best ever."

Doctors Revive Dead Negro Who Then Bears 6 Pound Boy

Daily News Fri. 7-5-57 Jackson Miss. 19 P. 2

CHIPLEY, Fla. (UP) — A 25-year-old Negro woman died on the delivery table, was revived three minutes later by two Chipley doctors and then gave birth to a 6-pound, 12-ounce boy, it was reported here today.

Drs. Hugh Thompson and Walter Shehee of the Washington County Hospital said Mrs. Nellie Atkins, who has one other child, suffered a heart attack while in the delivery room late Tuesday night and was pronounced dead.

Thompson said he and Sheehee immediately opened her chest and massaged her heart. Three minuts later she was revived.

The doctors then delivered the boy by Caesarian section.

The doctors said that Mrs. Atkins breathing had stopped and there was no heart beat when she got into the delivery room. They said she had been in labor for two days and had been unable to deliver the child normally.

The hospital reported Thursday night that both mother and child were "doing fine."

Heredity Is Changed In Ducks by Injection

Post & Times Herald P. 9-B Wed. 7-24-57 Washington D.C.

PARIS, July 23 (AP)—A French scientist claims that he has changed some characteristics of ducks by injections and that many of the next generation inherited the changed characteristics.

"It is possible that this has been done for the first time," Prof. Jacques Benoit of the College of France said in a paper read yesterday before the Academy of Sciences.

Benoit suggested that application of his discovery to humans could have "far-reaching effects," possibly in increasing resistance to certain diseases.

Benoit reported a team of researchers under his direction last April altered the characteristics of 12 Peking ducks with injections. He said that of 26 ducklings hatched, about 70 per cent displayed the parents' new characteristics.

The paper emphasized that further experiments would be necessary before drawing any scientific conclusions, but said the results noted so far "could be considered as significant."

In the original experiment, three male and nine female eight-day-old Peking ducks were given injections of desoxyribonucleic acid, also known as DNA, which had been extracted from testicle cells of ducks of the Khaki Campbell species. The injections were made in the peritoneum membrane, the tissue protecting abdominal organs.

Benoit said marked changes were produced in the color of the beaks and feathers of the ducks, their size, the shape of their heads and bodies and the way they walk.

The feathers changed from yellowish white to snow white. The beaks took on a dark green hue instead of the normal yellow. The size was reduced about one third.

Birth Control Pill to Be Put on Sale

Herald P. 11-a Fri. 7-12-57 Miami Fla.

BOSTON —(UP)— A birth control pill will be placed on sale throughout the nation by fall.

Dr. John Rock of Brookline, Mass., one of the developers of the pill — comprised of a synthetic hormone called enovid—said that the oral contraceptive had proved successful in various tests at leading hospitals throughout the U.S.

The World-Telegram and Sun, a Scripps-Howard newspaper, said the contraceptive is "nearly 100 per cent effective."

Rock, however, refused to make a specific prediction on its effectiveness.

He said the new contraceptive will be placed on nationwide sale "as soon as the manufacturers get production rolling."

Dr. Irvin Winter, head of clinical research of G. D. Searle and Co. of Lindenhurst, N.J., the manufacturer, said, "It will be many years before we can say the hormone is 100 per cent effective."

Winter confirmed that his company planned to put enovid on the market by fall.

Rock said the hormone already is being sold by prescription in California.

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Bumper Baby Crop

New One Born Every 7½ Seconds



AT THE ACCELERATED birth rate in the United States, these three babies could have been born in 22½ seconds. The new birth rate is a baby every 7½ seconds according to the Census Bureau which has had to speed up its huge clock that ticks off vital statistics. Since there's a death every 20 seconds, our population is steadily growing.

By HUGH MORRIS

WASHINGTON — (INS) — So many babies are being born that the Census Bureau has been forced to speed up the electric clock which automatically ticks off the increase in population.

There is a net gain of one person every 11 second; when births and immigration are offset by deaths and emigration.

The previous rate of one addition every 12 seconds was outdated by recent population growth, and the bureau speeded up the timing of the clock to show the greater rate of increase.

On an average, there is a birth every seven and one-half seconds, a death every 20 seconds, a immigrant every one and one-half minutes and an emigrant every 20 minutes.

Since 1954 the clock had been showing a birth every eight seconds, a death every 21 seconds, an immigrant every two minutes and an emigrant every 24 minutes.

The bureau said: "The sustained high level of the number of births has been the primary factor in the continued rapid growth of the population."

During 1956 the nation's population increased by nearly three million to a year-end total of 169,800,000.

There were 4,200,000 babies born and 1,600,000 deaths in 1956. The death rate of 9.3 for every 1,000 persons was the same as in 1955 and a trifle higher than the record low of 9.1 in 1954.

Net civilian immigration to the United States during the past year amounted to 344,000.

The electric clock, a major tourist attraction in the lobby of the commerce department building, is maintained as a display to present population projects at any given moment.

Electric lights are geared to flash blue for every birth, purple for every death, green for every immigrant and red for every emigrant. They represent average rather than actual changes in the population.

TB Drug Gives Lift To Tranquil

SYRACUSE, N. Y., April 6 (U.P.)—Medical science has come up with a drug to combat excessive tranquility.

The drug, called iproniazid, has the opposite effect of the celebrated "tranquilizer" drugs. Iproniazid lifts the moods of persons who have slumped into a mental state resembling that of a vegetable.

The de-tranquilizer was described today at a regional research meeting of the American Psychiatric Association.

Dr. Nthan S. Kline, of the Rockland (N. Y.) State Hospital, said the drug was tested on 17 psychotic patients living in a mental twilight. Twelve, he said, were "definitely improved" by iproniazid.

Other evidence of the drug's effectiveness was presented by Dr. Arthur L. Scherbel, director of the department of rheumatic disease at the Cleveland (Ohio) Clinic, and Dr George E. Crane of the Montefiore Hospital, New York City.

Scherbel said 30 victims of mild to severe rheumatoid arthritis responded to the drug with "increased appetite, weight gain, general well-being, and the disappearance of easy fatigability." Crane said 20 patients suffering from extreme anxiety, depressions and debilitated conditions showed improvement.

Tranquilizers are used to combat "hyper-activity," while iproniazid has the effect of a "mood-lifter" upon the depressed.

The drug was first developed by Hoffman-La Roche laboratories as an anti-tuberculosis agent. Further experiments were made after TB patients responded to the drug with a sense of happy wellbeing.

Business Outlook

Post + Times Herald

Baby Boom of 1940s Threatens Education

Wash. 4-5-57 Washington, D.C.

P. 21-C

By J. A. Livingston

IF THE RUMOR has not already hit you, then brace yourself. Trouble's ahead — real, bad trouble—for boys and girls who want to go to college. Right now the small crop of depression babies is having a time crowding into overcrowded schools. What will happen when the boom babies of the late '40's want to say hello to Latin, calculus and nuclear physics?



Livingston

Consider the problem of Harlan Henthorne Hatcher. During each of the six years he has been president of the University of Michigan, he has been asked by the Michigan Legislature: Do you consider it beneficial to have 30% of the students at Ann Arbor from out of the state?

In five of the six years, when Hatcher answered, "Yes," that closed the matter. But now the legislators want to know more. Why should Michigan taxpayers provide education at bargain rates to students from other states—especially New York?

IF nonresidents want an education at Ann Arbor, why shouldn't they put up the full cost, estimated at $1250? At Michigan, the nonresident fee is $470. The resident fee is $200. These compare with fees of $1100 at Yale, $1150 at Pennsylvania, $1000 at Harvard, $1100 at Cornell and $1200 at Princeton.

This line of questioning was stimulated by Ohio State University's recent decision to boost nonresident fees by $120 a year to $600, as against the $225 fee charged residents of Ohio. Yet it wasn't price alone that prompted Ohio State's boost in fees. It's the coming crisis in education—the shortage of professors, classrooms, laboratories and dormitories. Says Ronald B. Thompson, registrar at Ohio State: "We have first obligation to residents of this state."

Michigan's Board of Regents has always welcomed outsiders. On the Ann Arbor campus are students from all 48 states and 87 foreign countries. Nonresidents were looked upon as a broadening, a cosmopolitanizing, influence. In this tradition, Hatcher hopes he won't have to "build an educational wall around Ann Arbor." Such a trend among state universities would Balkanize, provincialize, higher education in America.

TODAY'S educational crisis is sociological. More parents than ever before are raising children to go to college. Industry accents higher education. Consequence: Facilities are taxed even though present-day students were born in the low-birthrate era of the depression as follows:

Year	No. of Babies
1936	2,355,000
1937	2,413,000
1938	2,496,000
1939	2,466,000
1940	2,559,000

What will happen in 1959 when college applicants come from this much larger crop of babies?

1941	2,703,000
1942	2,989,000
1943	3,104,000

And there's another leap. The postwar babies, those born in 1948, 1949, and 1950 et seq., will register for college starting around 1966. Looking at these statistics, registrars of state universities shudder, then think of tariff walls in self-protection:

1948	3,637,000
1949	3,649,000
1950	3,632,000

And currently the number of births exceeds 4,000,000!

NEW YORK is most vulnerable to educational quarantine because it "exports" so many students, yet cannot—at present—offer reciprocal education. It has state teachers' colleges, but no general state university. At Michigan, New York leads all states in out-of-state students with 1194. Ohio is next with 890, followed by Illinois 869, and Pennsylvania with 337. But Ohio, Illinois, and Pennsylvalia all have state universities —open to students from Michigan.

No doubt, all state universities will establish higher fees for out-of-state students—possibly prohibitive fees. And quota systems may be adopted: "You take our boys and girls and we'll take yours."

Heretofore, the state university has been an economic boon, the haven of qualified students unable to afford the much higher fees of private colleges. Now overcrowding erects economic and residential barriers against free-choice, low-fee higher education. Not good.

We must expand our colleges now!

New York Cotton

NEW YORK, April 4 (AP)—Cotton futures closed unchanged to 30 cents a bale lower than the previous close.

	Open	High	Low	Close	Net chge.
May	35.18	35.18	35.10	35.17	— 1
July	34.67	34.67	34.63	34.67	unch.
Oct.	33.54	33.56	33.46	33.51	— 2
Dec.	33.56	33.60	33.46	33.50b	— 3
Mar.	33.62	33.63	33.57	33.57	— 3
May	33.60	33.63	33.52	33.75b	— 3
July	33.07	33.11	32.97	33.01	— 6

Middling spot 35.45n, unchanged. n-Nominal; b-bid.

Over Million Have Died From Automobile Accidents

Daily World Atlanta, Ga.

Thurs. 4-4-57

WASHINGTON, Conn. — Over a million people have died in highway accidents since 1900; at least 40 million more have been injured. With our population expanding and our cities spreading out, more cars and trucks are crowding our roads and making highway safety an increasingly serious problem for everyone in the United States.

The Center for Information on America has just issued its latest discussion guide, "Highway Safety: Can We Learn to Save Lives?", to show what can be done to achieve greater safety on the Nation's highways. As the guide states, "The vital issue before us is really one of education -- finding ways to put our know-how to work for better highway safety." Improvements in car and highway design, more uniform traffic laws through the country, and an expanding driver education program in the public schools receive special emphasis in this unusually informative publication.

"Highway Safety: Can We Learn to Save Lives?" is one of a series of discussion guides called Vital Issues, published monthly by the Center for Information on America, Washington, Connecticut, and available for twenty-five cents a copy.

The Center is a non-profit organization established to further the understanding of current national issues through publications, discussion and study programs.

Medical Education; Its Future

Journal + Guide P 8

THE National Fund for Medical Education is appealing to business and industry for $10,000,000 additional annual income for medical schools.

Sat. 3-4-57

Every time we call a doctor we acknowledge our debt to medical education. Every time we consult a specialist, send someone to the hospital, fill a prescription nor take a drink of safe water—we pay a tribute to the nation's 82 medical schools.

Norfolk, Va.

The average American, it is safe to say, owes the last 21 years of his life to medical science. In 1900, life expectancy at birth was 49 years. Today it is 70.

Life-saving drug and miracle cures appear in a steady procession. Infectious diseases everywhere are in retreat. Atomic science and nuclear physics are paving the way for new laboratory triumphs.

* * *

However, there is another side to the coin. The very medical progress of which we are so proud — and for which medical schools are primarily responsible—has involved the schools in a struggle for solvency that can affect the future health and welfare of the nation.

At stake is not only the ability of the schools to supply medical personnel and meet their current obligations, but also their ability *to realize the full potential of the biological sciences* and to fulfill new opportunities for advancing the nation's health.

Unless the schools get additional support, the people's demand for more doctors, more research, more services may go unheeded. Many talented young men and women may be denied an opportunity to learn medicine.

New medical discoveries benefit no one unless there are skilled physicians to apply them.

Industry has a direct self-interest in medical education. Industrial programs and public health safeguards jointly pay dividends in increased efficiency, stepped-up man-hour production, reduced on-the-job illness and accident rates, reduced absenteeism, lowered insurance premiums and improved employe morale. Numerous before-and-after surveys of industrial plants show reductions to 50 percent in absenteeism from illness and accidents.

Considering what may be at stake—the health and security of the American people—it is hard to think of a more worthwhile investment.

BABY STRUGGLES

Daily News Jackson, Miss. Thurs. 4-4-57

9-Year-Old Is Mother, Doing Well

LITTLE ROCK, Ark. (UP)—A 9-year-old mother rested quietly today, but her 2½-pound boy struggled for his life in an incubator.

The child was born about a month and a half prematurely, officials at University of Arkansas Medical Center said Wednesday.

Dr. Eva Dodge, who delivered the baby, said the child's Negro mother was verified through a birth certificate to have been born n another state in March 1948.

Dr. Willis E. Brown, head of the center's Department of Obstetrics and Gynecology, said the mother is the youngest on his department's records, nosing out by two years an 11-year-old girl who gave birth to a baby in the hospital about three weeks ago.

Hospital officials refused to reveal further details. They would not give the girl's name, home town or whether she was married. William W. Hughes, news director for the center, said, "Doctors have decided to protect such cases as this as far as publicity is concerned."

The baby was placed in an incubator and doctors said he had a good chance to live.

19 1957

17 Team Up to Aid Rare Operation

Surgeons Stitch Boy's Heart

A rare heart operation has been performed with apparent success at the University of Pennsylvania Hospital on a 3-year-old Wilmington boy, stricken with a near-fatal attack when he was only a year old and thought doomed to early death, it was disclosed by hospital authorities yesterday.

The child, Lawrence C. (Larry) Smith, son of Mr. and Mrs. Coleman Smith, of 438 Morehouse drive, Wilmington, is recuperating at his home.

Seventeen persons composed the operating-room team for the delicate surgery, in which Larry's heart was opened for 25 minutes to allow surgeons to take four stitches—under direct vision—in the delicate inner portion of the heart.

The defect the surgeons had to correct had been there from birth. It was an unnatural opening in the wall between the sides of the lower part of the heart, the chief pumping mechanism. Through this aperture, blood passed with each heartbeat, and the effect was to seriously overload the heart's pumping strength, weakening it noticeably and sending an excessive amount of blood through the lungs. This overtaxed their capacity.



Larry Smith bids good-by to nurse Nancy Supernavage

A New Outlook on Old Age

Science Offers Us Twenty More Years of Life; What Does It Mean: Days of Ease or Hardship?

(This is the first of twelve articles on the problems of growing old.)

By Earl Ubell
Science Editor

Science has given most of us at least twenty more years of life than our grandparents could count on. What are we going to do with those added later years?

Are we going to shuffle down to the park every day and play checkers?

Will we keep on working, earning our own way and living in our own homes?

Do we see ourselves as sick and aged, possibly bedridden; empty human shells in wheelchairs in a chronic disease hospital?

Or will we find repose in retirement . . . fishing, reading, puttering in the workshop or garden as we dreamed we might?

Do we think our children will give us, if we needed them, bed and board? Will they respect us, give us the status we deserve?

Can we now think clearly of the years ahead when we won't be working, or when, as a housewife, the household chores will dwindle away and when our income will be cut to one-tenth of what it is now?

Or do we push these thoughts out of our minds? What will we do?

What Is Happening To People Over 65

At this moment, 14,000,000 men and women in this country have the answers to those questions. They are the people over sixty-five. They are finding out what it means to become old in an urban, industrialized and impersonal society. What is happening to them?

A seventy-year-old widow lives with her daughter and son-in-law, as do 13 per cent of her contemporaries. She chatters incessantly, has no other function but to criticize the young parents for their ways of drinking, smoking and child rearing. Where will it end?

A couple—he is eighty-three with a spine infection, she is sixty-eight with hardening of her brain arteries—live (as do three out of four in that group) in their own household. But they have an income under $2,000 a year. What happens when the old man goes to the hospital as he must? Who pays?

Accident-Prone Or Self-Sufficient

A vigorous man of sixty-four who has worked as a machinist for the same company all his life must retire next year under his firm's rules. His pension is adequate, but far less than he is earning. He has never done anything but work. What will he do in retirement? Even now he is terribly depressed at the thought and has had two accidents in the shop in the last month. His foreman eyes him suspiciously.

But there are other old people. A seventy-five-year-old chief of a suburban library is healthy and active. She runs the place with the verve of a woman twenty years younger. She lives alone and likes it. She never interferes with her children, but visits them often and they like to have her. She has friends and even a few enemies—acquaintances she doesn't get along with but that doesn't bother her.

Is this woman in the majority or minority of old people? The experts don't know. By their own admission, scientists and social workers have paid most attention to the infirm, the indigent and the mentally ill. The plight of these people screamed for action. As a result, official thought has turned again and again to homes for the aged, to hospitals and other institutions.

Miss Ollie Randall, consultant to the National Committee on the Aging and a pioneer in the search for answers for the aging, simply says, "It's the squeaking wheel that gets the grease."

Yet, at this moment only one out of twenty old people are in institutions. To be sure, there are at least half a million persons in such places, many of them barely existing under substandard, and even subhuman, conditions.

Even what is known about the medical, mental and biological processes of aging has been warped by the scientists' admitted focus on this single institutional class. The leaders in the field of gerontology—the study of the aging—are beginning to admit that the impact of the aged is broader and far more subtle.

There is the whole question of income maintenance. How can housing, health and nutrition be kept optimum when earnings have, as in the cases of two out of three aged, dropped to less than $1,000 a person?

And at a time when money comes in at a bare existence level, the old person has the real fear that a long-term illness may strike at any moment, wiping out his savings, using up his pension and social security income. At this time one out of seven have during the year an illness lasting three months or more.

Problem To Be Faced: Where Do They Fit?

But the most profound of all questions, the one we will have to answer one day and the single underlying theme of aging: where do old people fit in modern society? At the turn of this century one person in twenty-five was over sixty-five, two-thirds of them living in rural communities. Now one in twelve is over sixty-five, and two-thirds are in cities where family dwelling places are small.

How can an old person, whose chances of finding work may be only one in three, make himself part of a stream of life in a work economy? Isn't there a time to stop working? To retire? How can a retired person function in society? What is the grand involvement of their last years? What should it be? The experts don't know.

How the aging find their way in society will affect every one, for in fifteen years, thanks to medical advances, one in every ten persons will be over sixty-five. This single group will cast up to one-fourth of votes in elections. They will be the heaviest concentration of old people ever experienced by mankind.

Unless adequate housing, income, medical care are provided for the aging; unless a way is found to involve them in American life once more; unless years of neglect are overcome, the aged—and this is the view of authorities—will stop waiting and start grabbing.

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Negro Girl, 9, Due To Become Mother

LITTLE ROCK, Ark., Aug. 24 (AP)—A girl of doll-playing age is scheduled to become a mother in October.

Hospital authorities have revealed only that she is a Negro and that she is nine years old. Another Negro girl gave birth by Caesarean section to a 6-pound, 4-ounce girl on her 11th birthday last Saturday.

Dr. Eva Dodge attended the birth last Saturday as well as the birth of the mother 11 years ago.

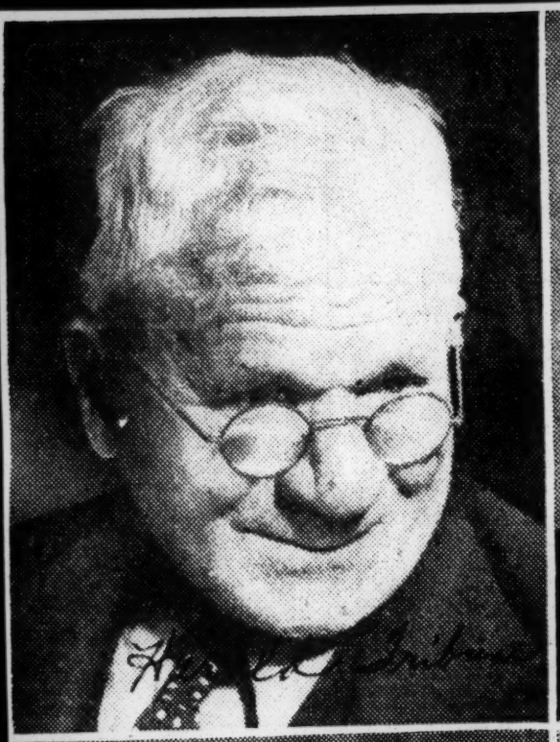
The 9-year-old has not been hospitalized. Authorities at the state medical center would not release information concerning her condition.

Girl Has Baby On 11th Birthday

LITTLE ROCK, Ark., Aug. 17 (AP)—An 11-year-old girl and the daughter she gave birth to are in good condition at the State Medical Center here, physicians said today.

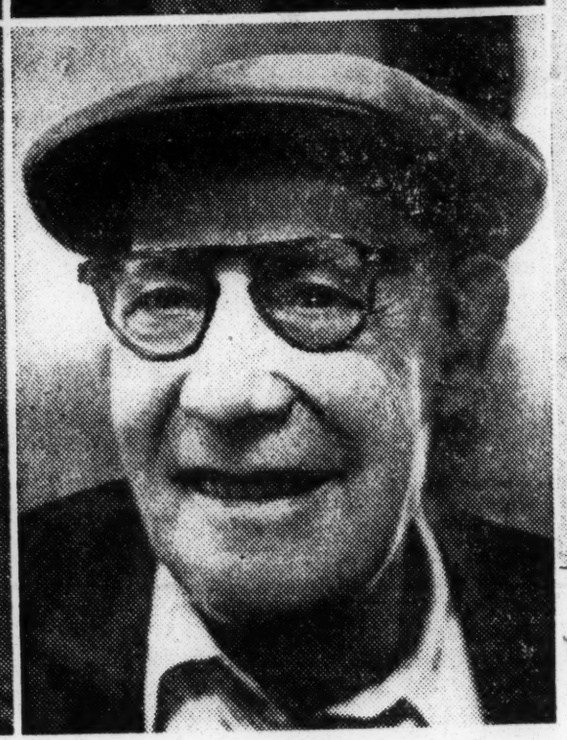
The 6-pound, 4-ounce baby was delivered by a Caesarian operation yesterday. It was the mother's 11th birthday.

Dr. Eva Hodge, who delivered the child, said the unmarried mother has been at the medical center for some time under her supervision. Officials at the center said that the mother was believed to be the youngest in the history of Arkansas.





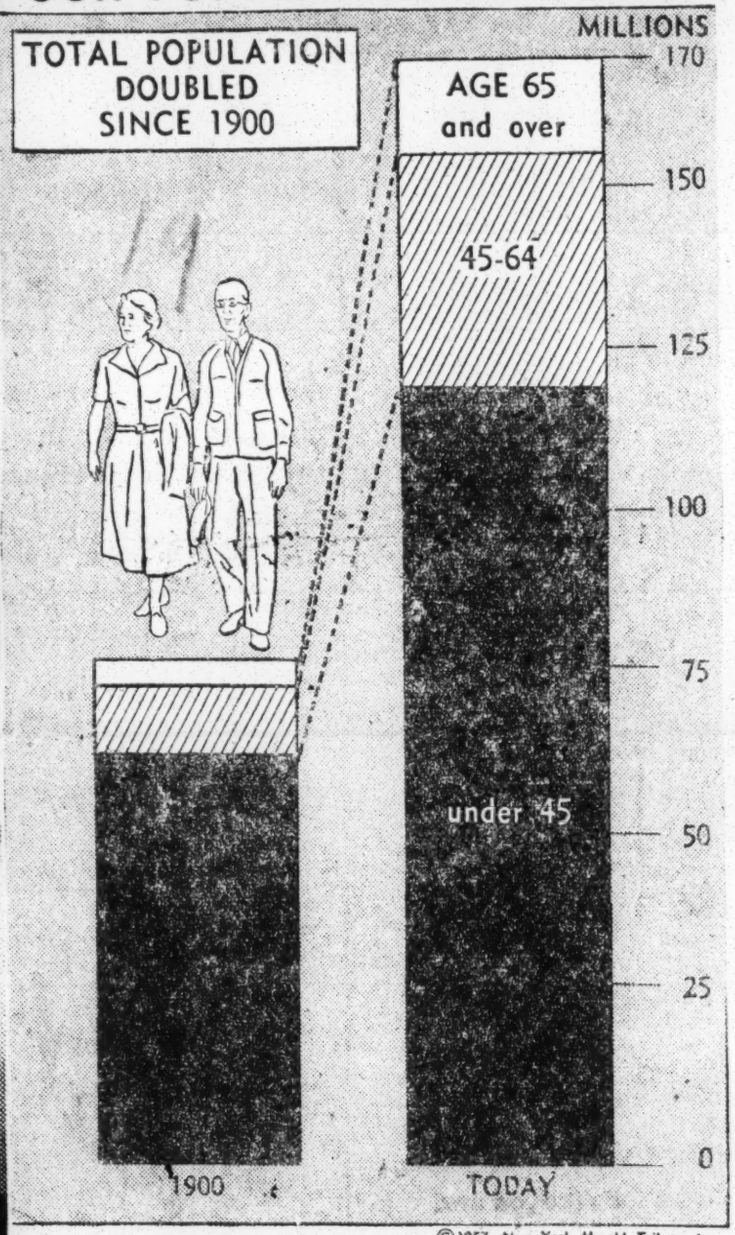




Herald Tribune photos by Morris Warman

The aging have problems to maintain themselves in the stream of life.

OUR POPULATION IS AGING



©1957, New York Herald Tribune Inc.

Chart shows how the proportion of the aged has quadrupled since 1900 while the population has only doubled.

19 1957

Medics agree to press fight for integration

Opp-American 4/16

Baltimore Md.

WASHINGTON — Physicians and hospital administrators from all over the country mapped a program for fuller participation in the nation's war on ill health in a two-day conference held at the 15th Street Presbyterian Church, Friday and Saturday.

4/13-57

After hearing addresses by both spokesmen of the allied professions and leaders in the forefront for integration in medical societies and hospital establishments throughout the country, the body went on record endorsing a number of concrete moves for implementing their program.

They pledged that they would be working in close conjunction with the NAACP and other organizations fighting for civil rights.

* * *

AMONG OTHER things, they agreed to the following:

The conference voted that legislation be sought which will amend the Hospital Survey and Construction Act of 1946 and its amendments so that the clauses which provide for separate provisions for separate hospital groups will be deleted, since such clauses now appear unconstitutional in the light of recent Supreme Court decisions.

The conference voted to request the National Medical Asciation and the NAACP to so provide for continuing support of its program, and to permit the acceptance by these organizations of contributions for this purpose from sources which might volunteer to do so.

An interim conference committee was formed of national representation which would be the corporate body of the conference.

It was voted that the local committee on arrangements of the present conference serve as an interim committee to nominate for registrants at the present conference individuals who would seem meritorious choices for membership on the national conference committee.

* * *

THE CONFERENCE voted that a second conference be held a year hence at a time and place to be determined with Chicago, Detroit and New York, being considered as sites where such a meeting might be invited.

The body voted that appreciation be expressed to the pastor, session and congregation of the 15th Street Presbyterian Church for the hospitality and sense of spiritual kinship it had enjoyed at their hands.

The local committee consisted of Drs. Montague Cobb, John W. Lawlah, Joseph L. Johnson, James E. Walker, Mitchell W. Spellman, Joseph N. Dodson, Charles E. Burbridge, William T. Parker.

Messrs. Cleveland R. Chambliss, James P. Neal, and Clarence Mitchell.

The auxiliary, NMA and Medico-Chi officers are:

Mrs. Charles B. Hayes, president, NMA; Dr. Bessie B. Small, Mesdames Eunice Matthews, Ada Henry, Sara Beldon, Rosetta Scott, Pauline Tureman, Hazel Anderson, Julia Harden, Claudia Rayford and Erma Cornish.

Among the organizations which sent representatives were:

Rear Admiral Dallas G. Sutton, American Hospital Association; Dr. Paul R. M. Donelan, American Medical Association; Mrs. Jessie H. Bakeman, Director, Montgo. City Health Fund, NASW; Dr. John R. Pate, District of Columbia, Department of Public Health; Miss Grace Marr, American Nurses Association, Miss Anna Heisler, American Nurses Association; Walter Cromwell, National Health Council; Dr. Marcus S. Goldstein, Division of Public Health Methods, USPHS; Earl V. Simrell, Div. of Medical Services, USPHS,

Robert M. Cunningham Jr., Editor, The Modern Hospital; Dr. Jesse A. Keene, D.C. Hill-Burton Advisory Committee; Eric Springer, Hospital Law Research Study, Univ. of Pittsburgh; Charles H. Bynum, National Foundation for Infantile Paralysis; Dr. C. Herbert Marshall, Southern Conference Educational Fund; Dr. Paul B. Cornely, The Physicians Forum; Dr. Anna T. Rand, The Physicians Forum; Dr. Robert C. Stepto, National Medical Fellowships Inc.; Mrs. Justine Smadbeck, Jessie Smith Noyes Foundation, Inc.; Tom G. Rathbone, Department of Vocational Rehabilitation, D.C.;

Rev. Charles C. Webber, National AFL-CIO; Dr. Philip A. E. Stebbing, Supt., D.C. General Hospital; Dr. Reginald G. James, D.C. Federation of Civic Assns.; Dr. Roscoe C. Brown, USPHS (Ret.); Dr. Raymond L. Hayes, Brookland Civic Assn.; Mrs. Mary C. Buckner, Interracial Catholic Council; R. C. Archer Jr., National Technical Association; Wellington C. Beal, Commission on Intergroup Relations, N.Y.; Sterling Tucker, Washington Urban League; Mrs. Margert T. Ware, Washington Urban League; Moss H. Kendrix, Moss H. Kendrix Organization; Dr. Alonzo G. Moron, Hampton Institute President;

CALIFORNIA

Dr. Julius Hill, Charles R. Drew Medical Society, Los Angeles.

WILMINGTON, DELAWARE

Dr. Earl C. Jackson, Wilmington Branch, NAACP.

DISTRICT OF COLUMBIA

Dr. Isaac N. Cupid, NAACP; Dr. W. Lester Henry; James R. Poole, Freedmen's Hospital; H. Herbert Baird, Freedmen's Hospital; Dr. John B. Johnson, Dr. Lena F. Edwards, Dr. R. Frank Jones, Dr. Henry A. Callis, Dr. Barbara P. Wright; Dr. R. Stewart, Randall, Dr. Dorothy B. Ferebee, Dr. James E. Roberts, Dr. Willard F. Jones; Dr. Ogbon N. Simmons, Robert L. Ephrain, Dr. Charles S. Ireland, Dr. Anna L. Standard, Dr. Charles H. Thompson, Dean, Graduate School, Howard University; Miss Marilyn Woods. Herbert O. Reid, Howard Law School; Dr. G. Franklin Edwards, Dept. of Sociology, Howard University; Austin Lawrence, John Edwards, Charles H. Cates, Dr. Sterling M. Lloyd, Elmer Henderson.

DELAWARE

Dr. F. W. Avant, Community Hospital, Wilmington; Dr. Hubert A. Eaton, Wilmington; Dr. D. C. Roane, Wilmington, Miss Janie L. Shaw, NAACP, Wilmington; Paul R. Reese, Community Hospital, Wilmington;

FLORIDA

Dr. Fred W. Alsup, St. Petersburg, Fla. Medical, Dental and Pharmaceutical Assn.; Dr. T. A. Adams, Daytona Beach;

ILLINOIS

Dr. Arthur G. Falls, Chicago, Provident Hospital; Miss Ruth Burney, Comm. to End Disc. in Chicago Med. Inst.; Mrs. Greta Green, Chicago, CED; Dr. Leo Goldman, Chicago, AACP, Northside Chapter; Dr. A. M. Mercer, Chicago Branch, NAACP; Dr. Robert G. Morris Jr., Chicago, Cook Co. Physicians Assn.; Dr. Clyde W. Phillips, Chicago, CED; Clyde L. Reynolds, Chicago, Provident Hospital; Dr. Jeremiah Stamler, Chicago, CED; Dr. Alfred B. Stein, Chicago, CED; Dr. Quentin Young, Chicago, CED.

KANSAS

Solomon H. Cates, Kansas City Branch, NAACP; Dr. Charles R. Roquemore, Wellington, Kans. State Conf. of Branches NAACP;

KENTUCKY

Dr. Maurice F. Rabb, Louisville, NAACP;

LOUISIANA

Mrs. Charles Keller Jr., New Orleans, Flint Goodridge Hospital; Dr. William R. Adams, New Orleans Medical Society; Dr. H. Horne Huggins, East Baton Rouge Parish Medical Society; Dr. A. C. Terrence, Opelousas, National Medical Association; C. C. Well, Flint-Goodridge Hospital, New Orleans.

MARYLAND

Mrs. Catherine Benston, Talbot Co., NAACP, Oxford; Rev. E. A. Hughes, Talbot Co. Branch, NAACP, Oxford; Lynwood A. Jones Jr., NAACP, Frederick; Fred E. White, NAACP, Frederick; Rev. John W. Holland, NAACP, Cooksville; Dr. H. L. Small, Denton.

MICHIGAN

Francis A. Kornegay, Detroit, Urban League; Damon J. Keith, Detroit, NAACP; Dr. J. Leonidas Leach, Nat. Health Committee, NAACP; Dr. L. F. Swan, Detroit Medical Society.

MISSOURI

Dr. Carl M. Peterson, Doctors Clinic, Kansas City; Dr. A. M. Townsend Jr., St. Louis; Mound City Medical Forum St. Louis Branch, NAACP.

NEW YORK

Dr. Sarah K. Blake, Manhattan Central Medical Society R. P. Crawford, New York Branch, NAACP; Dr. Arthur C. Logan, Upper Manhattan Medical Group; Dr. Jane C. Wright; Dr. Frederick R. Randall; Dr. Robert S. Wilkinson, National Health Committee, NAACP; Dr. A. G. Featherston, Manhattan Central Medical Society;

NORTH CAROLINA

Dr. Roy Wynn, Charlotte Branch, NAACP; Dr. Rudolph M. Wyche, Charlotte Medical Society, Charlotte; Dr. Reginald A. Hawkins, Charlotte Medical Society, Charlotte; Dr. Nelson L. Perry, Raleigh; Cortez Purvear, Winston - Salem Branch, NAACP; Dr. George R. Watts Gastonia;

OHIO

Andrew G. Freeman, Columbus Urban League; Dr. Kenneth W. Clement, Cleveland Medical Association; Harold C. Strickland, Toledo Branch, NAACP; Dr. Owen Walker, Columbus Branch, NAACP; Dr. James E. Levy, Cleveland Branch, NAACP; Dr. R. Clifton Hines, Cleveland Medical Association;

PENNSYLVANIA

Gaines T. Bradford, Pittsburgh, NAACP and Urban League; Dr. Russell F. Minton, Philadelphia; John L. Procope, Mercy-Douglass Hospital, Philadelphia; Ishmael Johnson, Allegheny - Kiski Valley Branch, NAACP, New Kensington;

SOUTH CAROLINA

Dr. Thomas Carr McFall, Charleston, Palmetto Medical Society;

TENNESSEE

Mrs. William Tipton Sr., Knoxville Branch, NAACP;

Dr. W. O. Speight Jr., Memphis, Bluff City Medical Society;

TEXAS

Dr. Curtis B. Sprott, Beaumont;

MISSISSIPPI

C. R. Rdarden, Meridian, Miss., NAACP.

VIRGINIA

Dr. Cromwell Douglas, Norfolk, Old Dominion Medical Society; Charles J. Greene, Norfolk Community Hospital; Dr. Alfred C. Fentress, Norfolk Med. Soc., Old Dominion Med. Soc.; Dr. O. W. Hoffler, Norfolk Community Hospital; Dr. G. Hamilton Francis, Norfolk, Old Dominion Medical Society; Dr. A. B. Harrison, Franklin, Va.; Dr. Harry T. Penn, Roanoke, National Health Committee, NAACP; Dr. Edwin B. Henderson, Falls Church, Pres. Va. State NAACP; John S. Mapp Jr., Richmond Community Hospital; Henry J. Whyte, Burrell Memorial Hospital, Roanoke; Dr. C. Waldo Scott, Old Dominion Medical Society; Dr. D. Webster Davis Jr., Richmond Community Hospital; Charles D. Fowler Jr., Charlottesville, NAACP.

WEST VIRGINIA

Dr. P. R. Higginbotham, Bluefield.

Anti-Rabies Discovery Is "Much Safer"

Journal and Guide

Sat 3-23-57

Norfolk, Va.

INDIANAPOLIS — (INS) — Eli Lilly and Co., last week announced the development of a new vaccine which it termed the most important anti-rabies advance "Since Louis Pasteur made the first rabies vaccine in 1885."

P. 13

The drug, reported as "much safer' than earlier anti-rabies vaccine, was made possible by the use of a duck-embryo method of production originated by Dr. Horace M. Powell, a member of the Indianapolis firm's research staff for 30 years.

* * *

RABIES VACCINES to now, have been made of rabbit brain tissue and in some cases have had unfortunate after effects, including paralysis or death of the treated person.

Thus doctors asked to care for a person bitten by an animal have faced a difficult decision in cases where it was not possible to determine if the animal were rabid.

* * *

THE PHARMACEUTICAL spokesman said that the new vaccine has shown it is effective and free of any paralytic factor.

Use of duck embryos to produce a vaccine does away with myelin, that whitish covering on brain nerve fibers, which apparently has some connection with the paralysis factor of rabbit brain tissue-produced vaccine.

Illegitimacy Doubles Here Since 1946

Post-Times Herald

Washington D.C.

Thurs. 1-31-57

Current figures available to the D. C. Department of Public Health show nearly twice as many illegitimate children are being born in the District today as there were 10 years ago.

Numerically, white illegitimate births have decreased 13 per cent, from 439 in 1946 to 382 in 1955, while nonwhite births increased 227 per cent in the same period, from 1391 to 3151.

The figures were provided by Howard West, chief of the Biostatistics and Health Education Division of the D. C. Department of Public Health at the meeting of the United Community Services Board of Trustees yesterday.

P. 3-A

Among white mothers 68 per cent of the births are first babies, while among non-whites only 37 per cent are first babies and 25 per cent are fourth children "or higher in the birth order," West said.

He said the figures are "minimal" as hospitals are hesitant to record births as illegitimate. More children born out of wedlock are immature or premature, indicating less adequate prenatal care, he added.

Schools do not have sufficient money to cope with the problem by providing needed special services, declared Mrs. A. L. Spencer, member of the Board of Education and chairman of the UCS Committee on Standards for Maternity Care.

In lieu of adequate school services, she said "the Health Department, schools and Recreation Department all must get together to do the job more effectively."

She said housing inadequacies, lack of supervised leisure time activities for girls, and lack of preventive programs, also are causal factors.

Elizabeth H. Ross, acting chief, Children's Bureau, U. S. Department of Health, Education and Welfare, said a big problem is getting unwed mothers medical, social and legal help early in pregnancy.

300,000 Owe Lives To Advances In Medicine

Daily World Fri. 3-29-57
Atlanta Ga.

NEW YORK, — Medical advances of the past half-century meant the difference between life and death to 300,000 of the four million babies born last year in the United States, Health Information Foundation reported today.

In the March issue of Progress in Health Services, its monthly statistical bulletin, the Foundation said that 108,000 infant deaths were registered in the U. S. in 1956, a rate of 26.1 per 1,000 live births. Had the infant mortality rate of 1915 prevailed during 1956 the Foundation added, another 300,000 babies would not live to celebrate their first birthday.

The outlook for today's infants is especially bright once the first week of life is past. The current mortality rate for the last 51 weeks of infancy is 10 per 1,000 live births, or only one-seventh of the 1915 rate. By contrast, the Foundation pointed out, the mortality rate for the first week is 16.7 per 1,000 births a decline of less than 50 percent in 40 years.

"Many diseases that formerly took high tolls of infants after their first week have been largely brought under control and in some cases eliminated," the Foundation said. "In general, these are the diseases associated with inadequate sanitation, poor hygiene, poverty and low standards of living. The record has been nearly as good among the digestive diseases .... Infant deaths from respiratory diseases have declined by almost three-fifths."

Behind this saving of 300,00 lives said the Foundation's president, George Bugbee, lie two major factors -- the medical progress of the past half-century and the public's "increased willingness to take advantage of this progress." Most U. S. mothers, he said, "have amply shown" their interest in receiving good prenatal care in having their babies in the hospital rather than in the home and in making sure their children get preventive medical care after birth.

Despite the good record, Mr. Mugbee added, there is room for further improvement. "It is likely," he said, "that further strides will be made in the future, but that the success of medical science will continue to depend on better understanding and liaison between hospitals and doctors on the one hand and the public on the other. By and large, infant mortality rates are highest among the socio-economic groups who today show the least inclination or ability to use modern medical services and modern health practices. However, there is latitude for improvement in all income groups .... improvement which can come only as modern knowledge is more broadly used by the public."

Tooth Decay Shows Drop In DeKalb

Constitution

Dental decay is "definitely lower" among children in DeKalb County after five years of fluoridation there than it is among Atlanta children, four public health and dental officials reported Monday.

The report points out that benefits of fluoridation of DeKalb's water supply are "greatest in the 6-to-8 age group."

Six-year-old boys and girls in DeKalb County are "40 per cent better off than the same age children in Atlanta," the report noted.

SURVEY FINDINGS

Findings of a recent survey of the teeth of 2,688 children in Atlanta and 8,273 children in DeKalb County (aged 6 through 14) are published in the current issue of the Journal of the Georgia Dental Association.

The report was made by Dr. John E. Chrietzberg, director of dental health services, Georgia Department of Public Health; Dr. Fred D. Lewis Jr., regional dental consultant, Georgia Department of Public Health; Dr. T. O. Vinson, director of the DeKalb Health Department, and Dr. James B. Carroll, dental director of the Fulton County Health Department.

They reported that one half of the 6-year-olds in DeKalb County have had no decay in their permanent teeth while only one third of the Atlanta children of the same age have had no decay.

SOME IMPROVEMENT

DeKalb children in the 9-11 age groups, whose permanent teeth were partially developed before fluoridation, show "some improvement" over those in Atlanta, the report states. But those in the 12-14 age group show "little or no improvement," according to the report.

The group said the dental decay rate was lower generally in DeKalb County than in Atlanta "even though the fluoride content of the water was not maintained at the recommended level at all times, especially during the early stages of the operation."

"This inadequate fluoride concentration can perhaps be attributed to over-cautiousness on the part of the operators and water system officials, who are continuously hounded to discontinue the process," the health officials said.

MANY MISTAKEN

Officials added that many who oppose fluoridation "are suffering under the delusion that fluoridation is hazardous to the general health of the public."

The study group predicted that as fluoridation continues "the older children will show benefits similar to those found in other studies if the fluoride content is maintained in the DeKalb County water system at the recommended levels."

"These benefits," the group insisted, "will extend into the adult population when enough time has elapsed."

SEE INCREASE

The officials making the report predicted that the number of children of all ages with no decay will continue to increase and eventually will affect all age groups as the fluoride project grows older in DeKalb County.

The survey on which the report is based was made by seniors in the Emory University dental school through the cooperation of Dr. John E. Buhler, dean, and by dental interns with the U. S. Public Health Service. They examined the permanent teeth of children in DeKalb County and Atlanta, and noted the presence or absence of decayed, missing or filled teeth in each child.

Watch Spring Keeps Woman's Heart Going

Daily Tribune
Chicago Ill.

Detroit, May 8 (AP)—A year ago a 34 year old Detroit mother of five children was told she had a life expectancy of six months. Today she is leading a near normal life—the main spring of a watch serving as a heart valve.

She is Mrs. Mabel Streeter. Wayne State university says that on April 5, 1956, she became the first person in whom a leaky heart valve was replaced by a metal spring.

The artificial valve was developed by doctors from the Wayne university college of medicine and the Elgin National Watch company from an alloy used in watch main springs. The company predicted it would last 300 years.

Mrs. Streeter was considered critically ill 18 months ago, unable to do any housework or walk up steps without aid. Now, her doctors say, she does her housework and some shopping and can climb eight steps without undue fatigue.

Used on 110 Dogs

When the operation was performed, the doctors described her condition as "rapid downhill." The mitral valve in the left side of her heart had calcified and its flaps turned inward, leaving a hole that never fully closed between heart heats. Rheumatic fever was blamed for scarring the valve, which calcified.,

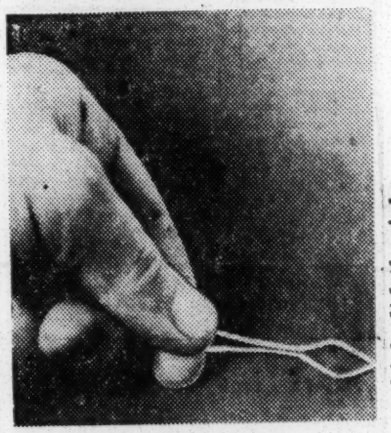
The valve normally opens to let blood from the lungs into the left ventricle — the main pumping chamber—and closes as the heart gushes blood into the aorta or main artery. But Mrs. Streeter's valve permitted the blood to pass both ways between the chambers and the body got only a trickle, so to speak.

Doctors who figured her life expectancy at six months decided to try the metal valve technique — used in 110 experiments on dogs, but never on humans. They had a record of installing 45 valves in aortic [main artery] openings of dogs.

A surgical team at Wayne State had been working for two years on perfection of the metal valve for just such an emergency as beset Mrs. Streeter. One of their first steps was to find an "ideal" metal.



MRS. MABEL STREETER



[United Press Telephoto]

Type of noncorrosive watch spring used in operation on Mrs. Streeter's heart.

Suggested by Repair Man

A watch repair man suggested the new alloy main spring. The doctors went to Elgin, which volunteered to work with them.

The valve fashioned by the surgeons is diamond shaped, as large as a penny, with a nylon web across it. When the heart is pumping it snaps up over the mitral valve opening; snaps down then to let in a new supply into the pumping chamber.

The team which did the job includes Doctors James H. Wible, Lyle F. Jacobson, Prescott Jordon Jr., and Charles G. Johnston.

They reported at a news conference yesterday that Mrs. Streeter's blood pressure now is normal.

The heart muscle works the valve; it did from the start.

19 1957

A Report on U. S. Medical Schools: 'Struggle for Solvency' Is Critical

Herald-Tribune New York Sun, 4-21-52 p3

By Judith Crist

A fight for economic survival is being waged by many institutions of higher education, but in the nation's eighty-two medical schools, the "struggle for solvency" has reached critical proportions.



Crist

So the National Fund for Medical Education has issued an appeal for $10 million a year, chiefly from industry, "to prevent any weakening in our health and medical structure." The organization warns that the financial problems of the medical schools pose a threat to the nation's future health and security. The appeal coincides with National Medical Education Week.

What the Schools Do

In the over-all educational statistics--there are only 29,000 undergraduate medical students—the medical schools appear to play a minor though an essential role in higher education. But the Fund, in a report entitled, "For Lasting Security," points out that undergraduate training is but one phase of what a medical school accomplishes—and lets the statistics pile up.

Besides the undergraduates, medical schools provide training for 11,500 graduate doctors, residents, interns and specialists; 21,500 practicing physicians taking refresher courses, and 19,000 dental, pharmacy, nursing and technical students take medical courses.

Also, some 72,000 family doctors, health officers, hospital staff members and other physicians participate in short courses, seminars and clinical conferences held either on medical school campuses, or in local communities.

Research Work

Add to this the fact that medical schools conduct nearly $60 million worth of research annually, provide free medical services for more than 2.3 million persons, and furnish leadership and counseling for thousands of health agencies, organizations and foundations.

The cost of operating the medical schools, like the cost of all educational operations today, is at the highest point in their history. Fifteen years ago it was $27 millions. Today it is $120 millions. Income from tuition is about $20 millions or only about a sixth of the cost.

"For every dollar the average school receives in tuition," the Fund report noted, "it spends an additional $5 on operation."

However, tuition has risen 84 per cent since 1940, and "further increases might bar many qualified students—students the medical profession could ill afford to lose."

Soaring Costs

Expanding enrollments, growing responsibilities, increasing fields of research and service, soaring costs—these add up to crisis, four times, perhaps, as great as that facing general educational institutions. For medical school education, the Fund points out, is four times as expensive as general university training.

A one-shot fund campaign is not the answer, according to the Fund.

"Medical schools must be assured of steady, recurring annual support," it says. "A training and research 'moratorium' is conceivable in any other field—but not medicine. It is shortsighted for the country to jeopardize essential continuity by forcing the schools into an annual contest for funds."

The major factors that make medical training expensive are the high teacher-student ratio (averaging four-to-one) necessary for individual instruction; laboratory supervision and bedside training; extensive hospital and laboratory facilities, and expanding research activities, "especially the fundamental research that is now recognized as a major medical school responsibility."

A recent cost analysis in a large Eastern medical school showed the four-year average cost of training a student was $15,029. For schools emphasizing research and graduate training, the cost has been estimated at about $8,000 a year a student. The over-all average is about $12,000 a student for four years.

Faculty Picture

A reflection of what one medical educator terms "too much economy already" in the medical schools, is the faculty problem. Only one medical school today has a completely, full-time faculty. Salaries are so low that positions are increasingly hard to fill, and for the last five years, vacancies have averaged about one in fifteen, acording to the Fund report.

Federal help is called only a partial answer, and the Fund believes that "in the best interests of medical education, Federal aid should be 'balanced' by substantial unrestricted private income, so that the spirit of free inquiry may continue to flourish in all the schools."

The Fund itself was established by leaders in medicine, business and education, in 1949 for the purpose of channeling such "private" support from business and industry. Shortly afterward the American Medical Association established the American Medical Education Foundation to obtain contributions from the medical profession.

Together, these two organizations have distributed nearly $14 millions to the eighty-two medical schools. About two-thirds of it came from business corporations. Last January, the Fund disbursed more than $3 millions and it hopes to exceed it this coming January.

The $3 millions, it should be noted, was the income from a $75 million endowment. Last year there were 1,737 corporations and business firms supporting the Fund, including more than 300 of the nation's 750 top corporations.

More Facts

The Fund presents a few more statistics that serve to emphasize its point:

Simply to maintain the current ratio of doctors—one to every 730 persons—the nation will need 315,000 doctors by 1975, when there will be an estimated population of 230 millions. There are now 220,000 doctors, and the current rate of increase is about 3,000 a year (the excess of new doctors over deaths and retirements).

"New schools in operation and in prospect can be expected to bring that figure to about 3,5[illegible] a year," the Fund reported, "or enough to supply roughly two-thirds of the need."

Citizens Join In Fight Against Parkinson's Disease

World Sat. 5-11-57 Birmingham Ala

MIAMI BEACH—(INS)— A group of 60 Miami Beach Civic leaders, backed by University of Miami researchers, Monday formed an organization called the National research foundation for Parkinson's disease.

The foundation plans to finance broad research on a National scale into the disabling ailment, which generally attacks elderly persons but is becoming more common among the middle-aged.

Needs for the research campaign were outlined by Drs. Samule Gertman and Irwin Perlmutter, of the University of Miami Gereatric clinic.

Parkinson's disease is marked by tremors and loss of muscular coordination believed due to brain injury and nerve deterioration.

The new organization hopes to have numerous funds-raising chapters to finance research coordinated by the National Body.

Many of the group's organizers have victims of the disease in their families, it was revealed.

Georgians Warned Against Overpaying For Birth Records

Daily World Fri. 5-24-57 Atlanta Ga.

The Georgia Department of Public Health announced today that it is refusing requests for birth certificates ordered through a firm which charges customers $2.00 per copy.

Birth certificates are available through the State Health Department or the local county custodian of vital statistics, for $1.00, and it cautioned Georgians not to pay more for this vital record.

L. M. Lacy, director, Division of Vital Records, stated that the Department had held up applications from a Washington, D. C. firm for about a month while deciding how to handle the request. The Department finally decided to send them back, he said, because of a Georgia law which says that only a person who may request copies are the individual in question (if an adult), his parents, his legal representatives, or government agencies.

Mr. Lacy said, "The firm sends some very official looking material to parents of newborn babies, offering to supply a copy of the birth certificate for $2.00 The return address is Washington, D. C., which gives it a further note of officialness." He explained, however, that the Washington address of the firm is a "mail drop' and that its actual offices are in Cincinnati. "Th, plan apparently is operating over the whole nation,' he said, "and in many cases parents are spending an extra dollar without need."

Dr. Halbert L. Dunn, Chief of the National Office of Vital Statistics, wrote Dr. Thomas F. Sellers, director, Georgia Department of Public Health, that the Cincinnati mail inspector is investigating the firm.

Surgical Miracle in Detroit

Watch Spring in Heart Keeps Housewife Alive

Herald Miami, Flo. P. 15-A
Thurs. 5-9-57

Miami Herald-Chicago News Wire

CHICAGO — The heart of a watch, inserted into the heart of a woman is keeping her alive, a group of surgeons said Wednesday.



Mrs. Streeter

An alloy, from which the mainspring or "heart" of a watch is made, has been fashioned into a heart valve for Mrs. Mabel Streeter, 34, of Detroit.

The metal frame, covered with nylon, swings open to permit the blood to pass between heart chambers and then closes to prevent backflow.

In the 13 months since the operation, it has been estimated that the tiny watch spring has opened and closed more than 38 million times.

Reporting the development in the journal of the Michigan State Medical Society, Dr. James Wible and his associates at Wayne State University said Mrs. Streeter was critically ill, unable to do even light housework.

A victim of rheumatic fever, she had been left with a leaky mitral valve.

Today, she is able to climb a flight of stairs, do her own housework and shopping.

The alloy that provides the frame for the substitute valve is called Elgiloy, developed by the Elgin Watch Co. for its main springs.

Dr. Wible conceived the idea of using it in the baffling heart problem while looking at an Elgin display in a jeweler's window.

The display carried the Elgiloy slogan, "The Heart That Never Breaks."

He visited Elgin several times and conferred with Thomas R. Green, metallurgist who fabricated more than 85 different valve springs for animal experimentation.

Unlike many metals, Elgiloy is compatible with human tissue. It is rigid enough to be supportive yet elastic enough to escape sticking to the heart wall.

Watch Spring in Heart Keeps Woman Alive

Post-Times Herald P. 3-a
Washington, D.C. Thurs. 5-9-57



Associated Press

MABEL STREETER
. . . new heart valve

Chicago Daily News Service

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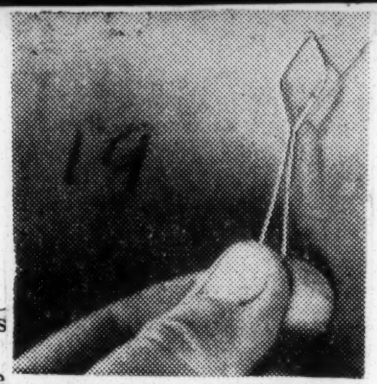
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United Press

This is the tiny spring, made of elgiloy metal, which was used to repair the damaged heart of Mabel Streeter.



Defender Chicago, Ill. Sat. 5-25-57 P. 5

MRS. MABLE STREETER, 34, of Detroit, with a German Shepard dog which underwent the same delicate operation she did. Mable and the dog are feeling fine since they both had operations over a year ago in which the main spring of a watch and a scrap of nylon were used to make artificial heart valves. They are shown at the Wayne State university Medical school where the operations took place. INP Soundphoto

19 1957

Negro Health At Highest Level As New Year Opens

Journal & Guide Norfolk, Va.
Sat. 1-5-57

Editor's Note:—Dr. John T. Givens of Norfolk, executive secretary of the National Medical Association, Inc., has for the past 20 years released a statement on the health outlook of the Negro at the beginning of the year. His long tenure of service in the medical profession gives him a unique opportunity to keep abreast of the health status of the Negro.

P. 9

By JOHN T. GIVENS, M. D.

The Negro race is the only race that has been able to stand side by side with the white race in matters of health, strength and longevity in any climate. The health of the Negro race has never been at a higher level than it is today.

The chief problems confronting the medical world today are those of hardening of the arteries with coronary heart attacks, cancer, the diseases and disabilities of the increasing number of older folks, high blood pressure, diseases of the kidneys, alcoholism, diabetes and nervous and mental diseases.

* * *

CONTINUED progress has been made in the control and elimination of tuberculosis, venereal diseases, diseases of childbirth, infancy and childhood, poliomyelitis and nutritional deficiencies.

The acute infectious diseases, such as blood poisoning or septicemia, typhoid, meningitis, pneumonia, etc., have been subdued and almost eliminated by penicillin and other antibiotics.

* * *

ARTHRITIS, which has always loomed as a dangerous specter, is in the process of being conquered. Tuberculosis and venereal diseases are no longer spoken of in connection with any particular race.

The chief problem now is the economic problem. As the Negro becomes more proficient in trades and technical pursuits and thus advances up the economic scale — his



DR. JOHN T. GIVENS
NMA Secretary

health is bound to improve. The elimination of slums and the substitution therefore of decent housing was the greatest step forward ever taken to promote the health of the Negro.

* * *

IT IS ALREADY paying off in increased efficiency, elimination of disease, crime and the contribution to the general welfare of the city, state and nation. Our schools and colleges are helping greatly in their teaching of hygiene, trades and technical pursuits, the field of electronics, chemistry and physics.

The National Medical Association feels proud that it has always pointed the way to better health for the underprivileged masses. Their next convention to be held in Cleveland, Ohio, Aug. 12-15, 1957 will stress the great influence of economics on the general health.

Americans Were Healthy During 1956

Journal & Guide Norfolk, Va.
Sat. 1-5-57

NEW YORK, — (INS) — Americans were among the healthiest people in the world during 1956 according to statistics compiled by the Metropolitan Life Insurance Co.

P. 7

Records show that the death rate in the United States is 9.3 per 1,000 population or on a par with that for 1955. This year is the ninth in succession to show a national death rate below 10 per 1,000 population.

* * *

NEW LOW rates were shown both for infant and maternal mortality. The infant mortality rate is 26 per 1,000 live births in 1956, which is about 25 per cent below that 10 years earlier.

There has been a rapid improvement in maternal mortality which dropped to about 4 per 10,000 live births in 1956 from 15.7 in 1946.

* * *

THIS MARKED progress in saving the lives of babies and mothers is of added significance inasmuch as it occurred during a period of relatively high birth rates.

The excellent health record of the American people results largely from the rapid growth made in various branches of medical science and from a rise in the standard of living, statisticians concluded.

WILL SEEK IMPROVEMENT OF HEALTH SERVICES

Daily World Thurs. 1-3-57
Atlanta, Ga.

The Department of Health, Education, and Welfare next year will seek continued improvements in Federal health services for American Indians, Secretary Marian B. Folsom said today.

P. 7

"It is an appalling fact that a vast amount of illness and death among our Indian citizens today is due to causes which modern public health is competent to control," Mr. Folsom said.

"We are confronted by an accumulated need of very large proportions. In attacking the Indian health problem, we must reduce death rates and incidence of illness among Indians to a level which should approximate those of the rest of the American people. Moreover, we must work more closely than in the past with the States, local communities, and the Indians themselves."

A recent survey by the Public Health Service indicates that the average age at time of death for Indians is 39, compared with 62 for the general population. Out of every 1,000 live births, 65 Indian infants die in the first year of life, compared with 27 in the general population. The Indian death rate from diarrehal diseases, which result from poor environmental sanitation, is eleven times higher among Indians than for the country as a whole. Indian death rates from tuberculosis are five times higher, from pneumonia and influenza three times higher, and from accidents two and one-half times higher than for the general population.

Secretary Folsom said that safe water supplies and better sanitary facilities are among the first requirements for raising the level of Indian health. Last year the administration proposed a Federally aided cooperative five-year program to establish and improve sanitary facilities among the Indians at a cost of $29 million. This measure, which was not enacted by the Congress last year, will be introduced again this year, the Secretary said.

The administration hopes to improve hospitals and curative services, and to extend public health services designed to prevent disease, Mr. Folsom said. "Plans will be presented for the training of greater numbers of Indians as practical nurses, sanitarian aids, and dental assistants, and for the training of professional staffs in the special problems of Indian health."

Health services for about 370,000 Indians are made available by the Public Health Service both through its own facilities and those of non-Federal agencies under contract. In many reservation areas, State or local health services available for the Indians are either extremely limited or non-existent.

Federal appropriations for Indian health activities for the 1957 fiscal year were $39 million, and for construction of Indian health facilities, $8.8 million.

Health Insurance Bills Readied for Congress

Evening Star Sat. 1-26-57
Washington, D. C.

Congress has been asked to set up a national health insurance program.

Similar proposals were made in past years but never became law.

P. 3a

Bils prepared for introduction by Senator Murray, Democrat of Montana, and Representative Dingell, Democrat of Michigan, would establish a contributory insurance system to cover the major costs of medical care.

Financing of the system would be similar to present methods for Old Age and Survivors' Insurance and unemployment insurance. Employed persons would contribute 1½ per cent of their earnings with an annual $90 maximum. Employers would match the payments.

Included would be self-employed persons and recipients of old age, survivors, disability and Civil Service retirement benefits. Individuals would be permitted to choose and change doctors and dentists, who in turn could accept or reject patients.

Care would include preventive and diagnostic examinations, laboratory and X-ray services and curative treatment at home or in hospitals. Also provided would be hospitalization of up to 60 days annually, dental services, prescribed medicines, home nursing, special appliances and eyeglasses.

Senator Murray and Mr. Dingell said in a joint statement their bills would "provide the one major missing ingredient of our national health program."

Leprosy Patients and Doctors Argue the Disease

News & Observer

By STANLEY MEISLER.

CARVILLE, La., Jan. 26 (AP)—The patient, his hands melted away by leprosy, laughed: "No, don't take my picture," he said. "I'll break the camera."

Is his ancient joke tragic or funny?

Raleigh N.C.

As you walk through the corridors of the nation's only leprosarium, you get no answer, only more questions—hazy, disturbing questions about a hospital filled with conflict.

Sun. 1-27-57

High Cost.

You are not even sure if the government—at a cost of $1,600,000 a year—should operate such a hospital.

Most of the 300 patients seem to feel there is no need. They feel social fright, not medical sense, has placed them in forced isolation, sometimes for years, sometimes for life. Their battle is not against a germ but against a public attitude that pictures leprosy as terrifying and unclean.

They feel more leprosy sufferers would seek earlier treatment if it did not mean forced segregation.

But doctors of the U. S. Public Health Service, which operates this 350-acre leprosarium in the swamplands by the Mississippi River, feel the hospital has medical justification: 1. leprosy is a communicable disease that demands isolation and 2. a supervised central clinic eases treatment.

No Understanding.

Neither argument, however, is based on a thorough understanding of leprosy, for there is no such understanding.

In 1847, Gerhard Armauer Hansen, a Norwegian scientist, discovered what may be the causative germ. It was mycrobacterium leprae, a germ which no scientist has been able to grow in a culture dish, inoculate into an animal or inject into himself. This inability to study the germ's growth has blocked science's fight against the disease. There is no real cure for leprosy.

Scientific guesswork assumes direct contact through natural openings of the body spreads the disease, which, in this country, is found chiefly in Louisiana, Florida, Texas and California.

Children seem most susceptible although the effects may not show until they grow up. Years elapse between the moment the germ enters the body and the moment symptoms appear. How many:

Doctors don't know. They guess maybe five, maybe ten years, perhaps less.

Communicable.

The patients' magazine, The Star, calls the disease "feebly communicable," or very difficult to catch. But the hospital's clinical director, Dr. Rolla R. Wolcott, says, "we don't say it's feebly communicable or very communicable. It's just communicable. We don't know enough about it."

Nevertheless, the U. S. Public Health Service permits visitors, if they are over 16. In the 61 years staff member has contracted leprosy.

Leprosy, especially in early stages, sometimes shows no ravages as it attacks skin and nerves

But about one-quarter of Carville's patients have been blinded by leprosy. Many have lost fingers, hands or forearms as the disease dissolved their bones. The feet of some are so distorted they cannot walk. Lesions and paralysis disfigure some faces.

In the last 15 years, doctors have used sulfones to treat leprosy. The sulfones often arrest the disease but do not cure it. In some instances, a case, stopped by sulfones, flares up again.

of Carville's existence, only one

But sulfones have been successful enough to allow many patients to leave Carville without any medical fear they will infect others. The population of the leprosarium has been decreasing with discharges at a higher rate than the average of 60 entries a year.

Change Name.

There is even a controversy over what to call the disease. Stanley Stein, the editor of the patient magazine and blind himself from the disease, wants to change the name to "Hansen's disease." He feels that the public thinks of the words "leprosy" and "leper" as something to be shunned and isolated. No patient will get a fair break, says Stein, until the words are destroyed.

"Both Stanley and I agree that leprosy right now is in the garbage pail," says Dr. Edgar Johnwick, the new medical officer in charge of Carville. "But I say let's get it into the living room. If we change the name, then Hansen's disease will be in the garbage pail. And we'll still have the problem of getting Hansen's disease into the living room."

This conflict between patients and doctors is almost trademark of the leprosarium, which shows little of a hospital's regular character. Because of the patients' length of stay, it has become a colony with patient-owned stores, a school, a newspaper, an American Legion post and a Lions Club. The leprosarium is constantly beset by community problems.

In fact, Carville has just emerged from a fight that threatened to wreck its morale.

Dr. E. M. Gordon, last year's medical officer in charge, cancelled several activities, including the traditional dance and golf tournament that Carville patients conducted for visitors. He also helped persuade the Public Health Service to consider tearing down cottages that some patients had built for themselves.

Cancellations.

Dr. Gordon felt cancellations were necessary to prevent spread of the disease and the removal of cottages was necessary so all patients, including married couples, would live in the dormitories and received uniform diet and rest.

But the patients felt Dr. Gordon was being unreasonably rigid.

Editor Stein led a campaign against Dr. Gordon's rulings. Newspaper articles and congressional inquiries ballooned the controversy until it snapped with the reassignment of Dr. Gordon elsewhere and the appointment of Dr. Johnwick at the end of 1956.

Dr. Johnwick immediately boosted morale by rescheduling the golf tournament. He also told married couples they should live in quarters separate from the dormitories, although he questioned the wisdom of patients rather than the government owning cottages.

The new medical officer says Carville should become an information center, pushing out the story of leprosy to the nation. He tells visitors only a public full of facts rather than pity can help the cause of leprosy sufferers.

LEPER COLONY HELD FILLED WITH CONFLICT

Tribune p. 28

Sund. 1-27-57

Chicago Ill.

Patients Feel Fright Keeps Them There

Carville, La., Jan. 26 (AP)—The patient, his hands melted away by leprosy, laughed: "No, don't take my picture," he said. "I'll break the camera."

Is his ancient joke tragic or funny?

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Segregation Is Forced

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Nevertheless, the United States public health service permits visitors, if they are over 16.

FREE MEDICAL CARE URGED IN ALABAMA

Commercial Appeal

Legislators Hear Plan For Needy Patients

Tues. 2-26-57

MONTGOMERY, Ala., Feb. 25.—(UP) — The Medical Association of Alabama proposed Monday that physicians render free service to needy patients and that doctors be granted immunity from legal suits "by disgruntled patients."

Memphis Journal

P. 23

Dr. Paul Jones of Camden, representing the MAA; Dr. D. G. Gill, state health officer, and G. C. Long of the Alabama Hospital Association led delegations at a hearing Monday before the Legislative Indigent Care Committee.

Dr. Jones recommended to the committee that physicians be granted immunity from legal suits "by disgruntled patients when the physicians have not been negligent."

The Medical Association's proposals included hospitalization for all indigent sick except those already taken care of by programs such as tuberculosis, cancer and mental illness.

The association recommended that hospitals be paid the actual cost of hospitalization of indigent patients without providing a profit.

Dr. Jones told the committee his association's proposal includes setting up a non-physician agency to determine financial eligibility for hospitalization.

Doctors would determine the patient's medical indication for hospitalization, however.

The committee will submit its report to the Legislature in May.

Alabama Legislators Pushing Broad New Health Program

Journal + Constitution Sun. 2-14-57 P. 5-E

Atlanta Ga.

$12,000,000 Additional Needed; Plan to Be Presented to Voters

By FRED TAYLOR

Staff Writer, The Birmingham News
Special to The Atlanta Journal-Constitution

MONTGOMERY, Ala., July 13—Alabama legislative leaders, with the strongest backing of professional, business and industrial forces ever lined up in this state, are ready to push through bills to underwrite a broad new public health and hospital building program.

Passage of this legislation, which already has gained overwhelming approval of the House Constitution and Elections Committee, is expected to touch off a concerted drive by these and other groups, aided by Gov James E. Folsom, for statewide ratification by the voters

Some 12 million dollars additional yearly would be provided for an expanded program for mental health, tuberculosis and cancer control, aid for heart patients, the blind, crippled children and others urgently needing more help.

Voters to Decide

It would be financed with a five-mill ad valorem (property) tax, which must be authorized by a vote of the people. The levy would amount to 50 cents on each 100-dollar property assessment.

Rep. Karl Harrison of Shelby, chief sponsor of three bills supported by a large number of other House members, expressed confidence the House and Senate would give speedy approval to three bills reported favorably by a nine-to-one vote. And he and other backers feel the state's voters will ratify this plan to raise more money for vital health needs.

"Never before in Alabama has there been such an organized and united effort to drive home the pressing need for each and every one of these health benefits," declared Rep. Harrison, a Columbian attorney who has been in the forefront of those seeking to provide more hospital facilities.

"The people have never voted down an important health program where they were properly informed about it and really understood the needs and significance of the program," the legislator added.

ALABAMA

Rep. Harrison emphasized that the program would make possible the construction of much-needed regional hospitals to meet urgent needs of the people. He said that this program would pay for medical expenses of those unable to bear this expense.

Specifically, it would make possible 1,000 more hospital beds in Birmingham, 750 more beds in Mobile and 500 more in Montgomery, with additional smaller regional hospitals at key locations throughout the state.

University of Alabama's huge medical center at Birmingham and Alabama Polytechnic Institute at Auburn would share in the greatly expanded health program.

Approximately four million dollars would go for indigent patient care, with this phase of the program to be boosted to eight million dollars by federal matching funds on a dollar-for-dollar basis.

Alabama Polytechnic Institute would get $4,500,000 for building and equipping a research laboratory. This would be used for research in plant and animal diseases affecting humans.

Mental Aid Funds

About two million dollars of this money would go to bolster funds for the state's mental hospitals.

And approximately three million dollars would be made available each year for hospital construction in various parts of the state. Part of this money would be used to amortize a 25 million dollar state bond issue for hospital buildings.

There would be numerous other agencies benefitting, including the State Medical College, which is part of the University of Alabama's medical center at Birmingham. It would get $400,000 more yearly for much needed additions to the faculty, plus $90,000 for training additional medical personnel.

19 1957

AMERICAN SOCIAL HYGIENE SOCIETY

Robinson And Douglass Get Hygiene Posts

NEW YORK — Jackie Robinson and Dr. Joseph H. Douglass, program coordination officer, US Department of Health, Education and Welfare, Washington, D. C., were both elected to the board of directors of the American Social Hygiene Association, it was announced last week by Philip R. Mather, Association president.

Mather stated the Association was honored and delighted to have as a new member Jackie Robinson because of his broad humanitarian interests. "We feel he can make great contributions to our work in strengthening and preserving the family."

Of Dr. Douglass he said, the Association is particularly fortunate in obtaining a person with Dr. Douglass' educational background and experience in areas of interest to the Association.

The American Social Hygiene Association, 1790 Broadway, New York City, was founded in 1912 by a group of distinguished educators including President Charles W. Eliot, of Harvard, and President David Starr Jordan, of Stanford university.

Goal of the Association is "to promote those conditions of living, environment and personal conduct which best protect the family as a social institution."

In making the announcement of Mr. Robinson's election to Board membership, Mr. Mather said, "the American Social Hygiene Association is delighted and honored to have as a new member of its Board a person of Mr. Robinson's broad humanitarian interests. We feel that he can make great contributions to our work in strengthening and preserving the family."

Mr. Robinson was the first Negro to play in the major leagues, having been signed by Branch Rickey, then General Manager of the Dodgers, in 1945.

• • •

AN OUTSTANDING student and athlete at UCLA, Mr. Robinson attended public school in Pasadena, Cali., and spent two years at Pasadena Junior College before entering UCLA.

As a baseball player, Mr. Robinson won many awards, including Rookie of the Year, Most Valuable Player and the batting title in the National League.

Jackie Named To Hygiene Association

Jackie Robinson, former Brooklyn Dodger baseball star, has accepted membership on the Board of Directors of the American Social Hygiene Association, according to an announcement by Philip R. Mather, president of the Association.

Flu Closes Another Geneva School; Entire Families Hit

Advertiser Montgomery, Ala.
Wed 10-2-57

Spreading influenza yesterday closed the second school in Geneva County within two days as outbreaks in other areas of the state appeared to be declining.

Coffee Springs High School was ordered closed yesterday after 186 of the 375 students failed to attend classes.

Principal Joseph P. Granger said he "had no choice" but to halt school operations until next Monday. One day teacher was absent with flu, he said, and her class only seven of the 36 pupils were in school yesterday.

Influenza is "hitting entire families" in the northwest Geneva County town, Granger said.

Closed down Monday for a week were the high school and elementary at Geneva where 400 students and six teachers were reported ill by principal J. F. Moore. The student body there totals 1,000, Moore said.

Two other Geneva County schools reopened Monday after being closed for a week because of sickness. Samson High School and Hacada Junior High resumed operations with near-normal attendance as infection declined.

Reports of Slocomb High School having closed because of sickness proved in error. Principal J. B. Davidson said attendance was "the best we've had in a long time."

Meanwhile, flu cases and respiratory infection were reported declining at the University of Alabama where nearly 1,000 students were hit; at Columbians, Tuskegee Institute and at high schools in several South Alabama counties.

ASIATIC FLU FUND



Herald Tribune—United Press

A masked Pakistani health official checking passengers on a train at the India-Pakistan border near Lahore in an attempt to prevent the spread of the Asian flu epidemic. All people traveling between the two countries are examined.

Asian Flu Epidemic Spreads

JOHANNESBURG, South Africa, Aug. 16 (AP)—The Asian flu epidemic is sweeping South Africa. Johannesburg's non-white Baragwanath Hospital reported more than 1,500 cases today. Four doctors, thirty nurses and sixty hospital workers were stricken. Cape Town's medical officer reported more than 300 persons have been attended by local hospitals. In Durban, seventy nurses and other members of the staff of the non-white hospital were ill. White schools in Port Elizabeth suffered a fall in attendance.

Bill Authorizes 2 Million For Public Health Service

BY LAY LEWIS

WASHINGTON — (INS) — The Senate approved Monday night a bill allowing the government to spend up to $2,800,000 to fight the Asiatic flu epidemic expected this fall and winter.

The measure authorizes the expenditures of $800,000 in new funds for immediate use and the remaining two million dollars in standby spending authority if needed by the public health service.

The use of $800,000 is $300,000 more than the administration requested.

The two million dollars could be drawn from disaster relief founds if the flu outbreak becomes "an actual potential health emergency of National significance."

The funds were provided in a supplementary appropriations bill carrying $1,824,001,547 to help finance various government agencies this year.

The measure was passed and sent to a house-senate conference by voice vote.

The senate appropriations committee said the extra $300,000 to combat flu would enable the public health service to contract with 42 state, university and private laboratories for diagnostic and surveillance work. The $500,000 budgetary request would have allowed only 20 such contracts, the committee said.

The two million dollars in standby authority would be used to expand the government's program in the event the present mild form of asiatic flu virus became more severe or more widespread than now anticipated.

Most of the money in the overall bill goes for military public works. The senate provided $1,625,500,000 for these projects--splitting the difference between the administration figure of $1,764,700,000 and the house-approved $1,521,500,000.

The bill also authorizes the transfer of $34,200,000 from defense funds for the earth satellite project.

FUNDS TO FIGHT FLU OK-ED BY CONFEREES

$800,000 Included In Catch-All Appropriations Bill

WASHINGTON, Aug. 20.—(AP)—Senate-House conferees Tuesday agreed on a 1.7-billion-dollar supplemental appropriations bill including $800,000 for control of Asiatic flu.

House conferees accepted the $800,000 inserted in the bill by the Senate to combat the threatened epidemic.

Also agreed to was a Senate provision that two million dollars more could be used out of disaster relief funds if the secretary of health-education-welfare determines that a flu epidemic constitutes a national health emergency.

The bulk of the money in the bill is for military construction projects scattered over the United States and at American overseas bases. The conferees voted about one and a half billion dollars for these.

However, the measure contains numerous other items for a variety of Government departments. This is the final catch-all bill of the session although two other appropriations measures—foreign aid and atomic energy—remain to be cleared.

The House conferees agreed to four of the five million dollars voted by the Senate to begin eradication of the screw worm and the fire ant by the Agriculture Department.

A $12,500,000 item to begin construction of a second Washington National Airport at Burke, Va., was reported in disagreement by the conferees.

This means the House, which originally inserted the money, will take another vote when the conference report comes up there.

600 Cases Of Asian Flu at SU

BATON ROUGE, La.—A total of over 600 cases of Asiatic flu among students at Souhern University in the past two weeks has increased cases of the virus to epidemic proportions, states Dr. R. M. Barranco, the university physician. New cases are coming in at the rate of nearly 50 per day, he said.

MEANWHILE, it was reported that the epidemic had hit several other campuses including North Carolina College in Durham, Grambling College in Grambling, La., and Xavier University in New Orleans.

Because many football players came down with the sickness, at least three football games were cancelled — Grambling against Paul Quinn in Waco, Tex.; NCC against Florida A. and M. University in Tallahassee, and Tuskegee against Xavier in New Orleans.

Ike Asks $500,000 To Fight Asian Flu

By the United Press.

WASHINGTON, Aug. 7.—President Eisenhower today asked Congress for $500,000 to prepare for a possible epidemic of Asiatic flu.

The money was requested to finance "immediate measures" by the Public Health Service to combat a fall and winter outbreak of the disease, which has spread to this country from the Orient.

The money would be used to assist states in coping with heavy demands for diagnostic service.

Under the plan, the Public Health Service would step up its production of a diagnostic reagent, a fluid being produced at the federal laboratory in Atlanta, Ga.

The funds also would be used to pay 10 additional specialists who would assist state authorities.

DEATH RATE RISES FROM FLU IN CITY

Times

Annual Figure Reaches 12.7 for 1,000 Marking Third Week for Increase

New York

CASE TOTAL DECREASES

Sat 10-19-57

But Disease Is Spreading Among Older Persons— Virus Sweeps Soviet

1 9 1 23 C

The death rate in the city has risen for the third consecutive week as a result of the Asian influenza epidemic.

The Health Department reported yesterday that the annual death rate for the week ended at midnight Thursday had risen to 12.7 for each thousand of population. The normal annual rate for this period would range between 9.1 to 10.1 a thousand.

Dr. Roscoe P. Kandle, acting Commissioner of Health, explained the rising rate:

"We are now in that phase of the influenza epidemic when older adults, rather than children, are getting the disease. Consequently, the number of deaths rises because older persons, particularly those already suffering from chronic and debilitating diseases, are more apt to die when they suffer the additional impact of influenza."

In the figures released by the department, influenza was given as the cause of death in twenty-seven cases and pneumonia, frequently a complication of influenza, as the cause of death in 152.

Earlier Totals Cited

The week before, influenza was the cause of death in seven cases and pneumonia in ninety-eight. The death rate during that week on an annual basis was 11.6 a thousand.

The influenza involved is presumed to be Asian influenza, the department said, because it is the only influenza prevalent here.

From all across the nation there were reports of a mounting death toll because of Asian influenza, apparently because the disease is now affecting the older members of the community.

Commenting on the city's rising death rate, Dr. Morris Greenberg, director of the Bureau of Preventable Disease, called the increase "significant."

Otherwise, respiratory treatment in municipal hospitals, for the period ended at midnight on Thursday dropped for the third consecutive day—this time to the lowest figure since the Department of Hospitals began to keep track of the epidemic.

On Thursday a total of 2,016 persons came to the clincis for treatment, compared to 2,643 on Wednesday and 2,979 on Tuesday. The previous low figure was 2,083 on Oct. 12.

In all a total of 70,005 persons have been treated for respiratory infections since the onset of the epidemic. Of these 1,011 have been hospitalized and 228 still remain in the hospitals.

Health officials said yesterday that while they had not thus far attributed any deaths in city hospitals directly to Asian influenza, they had heard informally that private hospitals were beginning to report an increase in such deaths.

Virus Grips Soviet Union

Special to The New York Times.

MOSCOW, Oct. 18—Like most of the world, parts of the Soviet Union are in the throes of an epidemic of Asian influenza known here as the virus grippe.

No statistics have been published on the number of cases reported, but medical officials grant that it is large. One representative of the Russian Republic's Health Ministry wrote that the "entire medical saff" had been mobilized in the fight against influenza.

Thousands of Moscow youngsters were reliably reported to have suffered from the Asian influenza and to have missed at least several days at school. Soviet medical authorities discussing the influenza epidemic with foreigners have said that, thus far, it has struck primarily at urban centers and in towns along the principal communication lines.

As far as could be determined, the disease had not moved into farm regions on a large scale.

Soviet medical authorities have advised that persons who contract influenza should be isolated as much as possible from others in the same room by putting a screen around the patient's bed. Those caring for influenza victims should wear face masks, they said.

The Soviet vaccine against Asian influenza is said to be effective, but the supply is limited. M. A. Buslaev, an official of the Russian Health Ministry's Epidemic Control Section, was recently in the newspaper Sovietskaya Rossiya that the production of the vaccine had been slow because time was required to study the new virus and to find a suitable medium for vaccine production.

Serum Being Produced

Mr. Buslaev reported that chicken embryos had been found suitable for the production of vaccine. Serum also is being produced. Most Soviet anti-influenza serum is administered in the form of nose drops.

Priority in receiving the available influenza vaccine, has been given here to the persons most likely to be exposed to the disease — medical personnel and workers in trade, transport and communications.

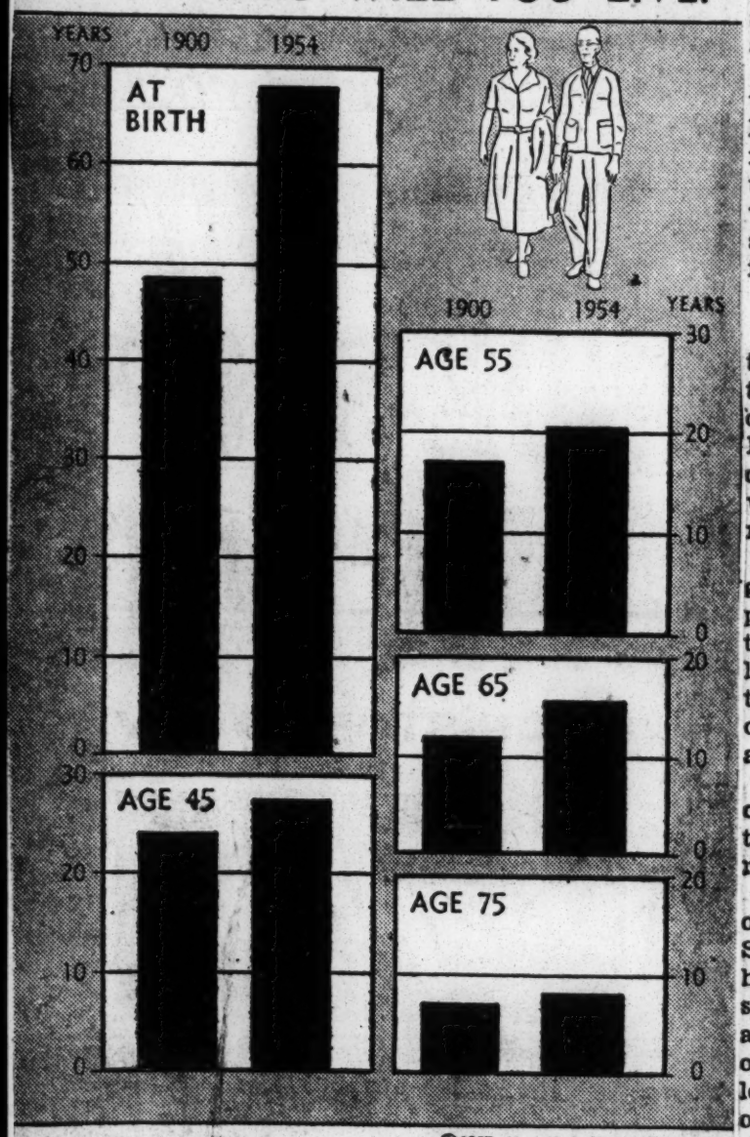


DR. HENRY COOPER, Jr., of Little Rock, Ark., checks for Asian Flu symptoms among patients in the integrated one-room school of National Jewish Hospital at Denver. The hospital is a free-care, non-sectarian medical center for diseases of the chest including heart defects amenable to surgery. For 58 years it has operated in accordance with the motto: "None may enter who can pay; none can pay who enter." The hospital does not discriminate either in its admissions or employment policies. Its school is part of the Denver public school system. Dr. Cooper is a pediatric resident at the hospital.



In Death-Life Drama—

A 23-year-old mother who "died" in the delivery room is shown resting comfortably in Washington County Hospital, Chipley, Fla., after a dual operation, perhaps unique in medical history. Mrs. Nellie Spires Atkins suffered an attack which stopped her heart for about three minutes. While Dr. Hugh Thompson Jr. (left) made a chest incision and massaged the heart back into full action over a period of about 20 minutes, Dr. Walter Shebee (right) delivered a six-pound boy by Cesarean section. A nurse, Ann Feckler, holds Mrs. Atkins' baby.—Wide World Photo



©1957, New York Herald Tribune Inc.

Comparing the life expectancy in 1900 and 1954 of various age levels.

A New Outlook on Old Age

Morale Is Found Highest Among Those Who Work; Time for Creative Self-Realization Is Also Urged

(This is the second of twelve articles on the problems of growing old.)

By Earl Ubell
Science Editor

No single ideal of successful old age has captured the energies and imaginations of old people in America today. That fact stands out from the few scientific studies that have been made. We know what to do with youth and middle age but no one seems to know what old age is for.

Thousands have succumbed to the lures of Florida to pass the rest of their days in the sunshine. Many have found quiet happiness there.

A handful—the Baruchs, the Hoovers and even many lesser known—have achieved classic old age: patriarchs who, with repose and equanimity, continue to portion out wisdom and to influence their families and communities.

But most others remain in their own homes, in most cases hemmed in by low income and fearing the momentary visitation of illness. They try to do what they have always done, always found satisfaction doing: work.

Resist Retirement

The desire to work dominates the 14,000,000 over sixty-five in this work-centered society of ours, if the evidence is to be believed. Two out of five of these older men and one out of ten women are still working. Retirement is being resisted.

Dr. Lillien J. Martin, the grand pioneer in helping old people and who died in 1943 at the age of ninety-two after a lifetime in gerontology, reported that the most bitter complaint of old people was: "I'm no use to anyone, not even myself."

One old woman, who had received a beautiful chair as a gift, told Dr. Martin's aid: "Yes, I'm rocking myself to death in it."

Dr. Bernard Kutner, in a study of 500 old people for the Russell Sage Foundation, found the highest morale among those still gainfully employed. Those active in clubs, hobbies and other interests had somewhat lower morale and gloom swept over the inactive. Married housewives and employed widows were far better off emotionally than the inactive widow.

But Dr. Harry Levine, who as director for old age centers for the New York City Department of Welfare founded the idea of day centers for disemployed old people, asserts as strongly as he can: "There is a time to stop working for money."

Compromise Between Work and Free Time

Old age to Dr. Levine is a time for maturity; a time for creative self-realization in art, reading and craft; a time for voluntary work in society; for contributing social know-how to the family and a time of preparation for the acceptance of death.

Between these two poles—work vs. free time—the country's old people make their compromises. They work where and when they can. A comparative few have hobbies and other interests. They visit their children. They watch television.

In general, as they live apart from their relatives other than their wives, time stretches out in front of them like a railroad track across the desert.

Dr. Leo W. Simmons, a professor of sociology at Yale University, concluded after a study of many primitive societies that successful aging ties closely to property rights and to social usefulness.

"People have aged most successfully," he said, "when they have discovered or created for themselves effective positions and roles in the very societies of which they are a part."

But in this country, another study shows, the status of aged groups—with the exception of propertied upper-class widows and retired farm owners—has declined steadily in the eyes of the public. The old in this country are not creating effective positions for themselves.

Two Ingredients for Successful Old Age

Mrs. Geneva Mathiasen, director of the National Committee on the Aging, points out that there is still time for the old to find their way. "After all," she said, "nobody knows what a natural, healthy, economically secure old age is like. It's never existed for large portions of the population."

Whatever the old find as their grand involvement in life, two ingredients must be present in any recipe for successful old age: health and economic security. The two are intertwined.

Dr. Kutner, in his study, found good health among 80 per cent of the high income-high social group compared to only 50 per cent among the poor old people.

However, the well-to-do people in Dr. Kutner's survey seemed little affected in their morale by poor health, while the poor in ill health felt dismal. Morale was higher generally among the economically secure than among the poor.

Wheelchair Doesn't Dampen Her Spirit

What actually happens to people? Here is a case that departs from statistics. A broken hip did not lower the spirits of a seventy-two-year-old woman in a chronic disease hospital. She had a small income from subletting rooms in her apartment, and she was eager to get out of the wheelchair to get back to work.

"I remember my father always taught us to observe things," she said. "He took us out to the woods and gave us prizes for spotting unusual birds or plants. I have always liked observing things.

"We were always taught to bear no bitterness either. If we fought during the day . . . my brothers and sisters . . . we had to make up before dinner time. It was over. These are the things I remember."

So here is a woman who never married, rarely goes to church, does newspaper puzzle contests, has no economic resources. Yet she appears not the least bit mindful of her ill-health or the thought of being old.

Is she a successful oldster? By some standards, no. By her own, yes. She seems to have inner resources acquired in her youth, and in spite of what some would call a narrow life she has a good time in her old age.

The lesson from all this for the young and the middle aged is a simple one: take care of your health as best you can, develop as many resources for economic security as you can, work if it is possible, or, in its absence start looking for ways to involve yourself in the community as a useful citizen.

And failing all this, look within yourself for hidden emotional resources: a bird your father showed you, the love of a laughing grandchild or the strength from your religious faith. It's as simple as that.

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(In the third article, appearing tomorrow, Mr. Ubell relates how laboratory experiments tell scientists what it means to grow old.)

In N. Carolina, Virginia
Journal & Guide

Half-Million Children In 2 States Have Eye Defects

Sat. 3-16-57 Norfolk, Va. P. 14

ST. LOUIS, Mo. —At least 200,000 pupils in Virginia and over 300,000 pupils in North Carolina have undiscovered vision problems which handicap them in school achievement, according to the respective state Optometric Associations, which sponsored "Save Your Vision Week" March 3-9.

These figures are based on cross sectional studies in many communities throughout the nation.

• • •

ON THE BASIS OF minimum standards set by optometry, medicine, and education, 35 to 40 per cent of all children need care. When adequate screening methods are used, it is found that less than half of these are discovered in the vision screening tests commonly used in schools.

Parents and teachers are becoming aware of the importance of school vision care. They know that more than half of all reading failures are due to vision problems. They know that vision handicaps may interfere with personality development.

• • •

MOST COMMUNITIES have a long way to go, however, before their screening methods are adequate. The Snellen Letter chart read at 20 feet is still the only test in many schools. It is far from adequate, because the child's school work is done at about 15 inches and requires visual skills not covered by a letter chart test. It is a 19th century method which should be supplemented with instruments based on modern science.

Modern screening projects which test for near vision, coordination of the two eyes and skills essential for reading can be administered as usual by laymen under professional supervision. They require only a few minutes per child and are conducted at the schools. In many cases parents and others in the community help administer the tests, and civic organizations finance the cost of instruments and forms that may be beyond school budget limitations.

"Vision for School Achievement" was the slogan of the optometric association's Save Your Vision Week which this year is in observance of the centennial of the National Education association, the professional organization of more than 600,000 American teachers.

Blindness On Increase In The United States

Daily World Fri, 2-15-57
Atlanta, Ga. P. 3

Because of the lengthening span of human life, blindness is increasing in the United States!

In an article in the current issue of Town and Country magazine, Dr. Franklin M. Foote, executive director of the National Society for the Prevention of Blindness, estimates that the nation's blind population is now 3334,000 with 27,000 of these persons losing their sight during the last year. The cold statistics are made more appalling by the fact that from fifty to seventy percent of all blindness could be prevented -- if more money was available for research.

To meet this challenge for research and education, The Opthalmological Foundation, Inc. was created in 1930 by Dr. Conrad Berens. Among the scientific innvestigations now being sponsored by the Foundation is the glaucoma-detection project.

One of the most insidious diseases of middle and advanced years, chronic simple glaucoma is characterized by increasing pressure inside the eyeball that may cause it to harden, leading to destruction of the retina and optic nerve and resulting in blindness. As much as 14 percent of the blindness in the U. S. is attributed to this condition. And surveys have indicated that one out of every fifty persons over forty has undiagnosed glaucoma. On the basis of this figure, it has been estimated that more than a million and a half adult Americans have glaucoma and do not realize it.

When discovered in an early stage, there is hope of controlling the disease. To aid these unsuspecting victims, The Foundation sponsored the development of the "ocular hypertension indicator," a simple, rugged instrument that can be used by general practioners to measure pressure within the eyeball. In addition, the Foundation has distributed an instruction text, "Glaucoma in General Medical Practice" to more than 12,00 physicians and medical students.

Once-Doomed Youth Gets New Life In Rare Surgery

LOUISVILLE, Ky. — A 19-year-old youth, who was given little chance for life a few months ago, today faces a bright and cheerful future, thanks to the devotion of his twin brother, the generosity of several forces in the Mid-West, and a decision by the Massachusetts Supreme Court.

Leon Masden of Shepherdsville, Ky., a patient at Boston's Peter Bent Brigham hospital, is not yet completely recovered from the condition which attacked both of his kidneys.

He still faces a long siege of treatment and hospitalization. But today, thanks to his identical twin brother, Leonard, who donated one of his well kidneys to save his brother's life, Leon's chances for recovery are excellent.

Sat. 3-24-57

COLLECT $350

Cooperating to give Leon a chance at life were the people of Shepherdsville, who collected a fund of $350 to help the youth, and the Brown-Forman Distillers Corp. of Louisville, who donated the use of its company plane, a DC - 3 named "The King Forester," to fly the youth, his mother and brother to Boston.

The story began last October, when Leon developed a rare kidney disease, called pyelonephritis, which attacked both his kidneys.

The only hope for a cure, doctors told his mother, Mrs. Flaggie Masden, was a rare operation, performed only three times before in which the well kidney of another person—usually the operation works only with identical twins—is removed and transplanted to replace one of the sick kidneys.

Mrs. Masden, a 55-year-old resident of the small Kentucky town, who had reared eight children almost single - handedly, had no money to pay for the expensive surgery.

More than that, doctors told her that the operation should be performed in Boston's Peter Bent Brigham hspital, where it had been done before.

When the news of Leon's illness spread in the small community, Mrs. Masden's neighbors contributed to set up a fund of $350 and Leon, was moved to Louisville's St. Joseph's Infirmary pending arrangements for the operation.

Meanwhile, George Garvin Brown, president, and Robinson S. Brown, jr., vice president of the Brown-Forman Distillers Corp., hearing of the plight of the family offered the use of the company's plane and pilots to transport the family to Boston.

On May 28, Leon, his mother and his twin brother, who had offered to give up one of his well kidneys to save his brother's life, were flown to Boston.

NEW HITCH

There, while the youths were undergoing pre-operative preparations, a new hitch developed, and the Massachusetts Supreme Court was asked to solve this problem.

Because the twins were only 19 years old — below the legal age of consent — doctors were afraid to operate on the well brother, Leonard, to remove his good kidney, for fear they would open the way for possible future suit for "invasion" of Leonard's person.

On June 12, Justice Edward A. Counihan, jr., ruled that Mrs. Masden had the right to consent to the operation on behalf of her son, Leonard, and eight days later, the kidney transplant was performed.

A month later, Leonard was discharged from the hospital, but his twin brother still has a month more of treatment and surgery. However, doctors hold out great hope for Leon's recovery, thanks to his brother's well kidney, the neighbors and the generosity of a Louisville company.

One Out Of Eight Tested In Health Fair Found With Defects

Daily World Wed. 5-13-57 Atlanta, Ga.

The second annual Health Fair co-sponsored by the Health Education Department of the Phyllis Wheatley, YWCA (a Community Chest Agency) the Atlanta Tuberculosis Association and Fulton County Health Department was held recently at the Neighborhood Union Health Center, 186 Sunset Avenue, N. W.

The long range objectives of the Health Fair were to create increased health consciousness through understanding of community and personal health problems; to stimulate the practice of preventive medicine and periodic health examinations and to urg use of health services and other community facilities.

Approximately 800 persons availed themselves of the opportunity to take advantage of the health services offered for two days. Despite the unfavorable weather the first day, more than 500 persons attended the Fair. On the second day at closing time each testing booth had long lines waiting to receive tests.

OVER 1,000 DEFECTS

From approximately 8000 different tests administered, over 1000 physical defects were revealed. Persons showing need for medical attention as a result of tests completed at the Fair were referred to their private physician or Health Department. Other persons needing further medical diagnosis were notified by mail. Those not receiving any written notice can be assured that their test results were satisfactory, according to authorities.

The Health Fair Steering Committee chaired by Clarence Coleman, Associate Secretary, Atlanta Urban League, a Community Chest Agency, was an important group in the initial planning. This committee, which included representatives from the Atlanta Medical Association, Atlanta Dental Society, Visual and Hearing Specialists, Public Health Nurses, Practical Nurses, Laboratory Technicians, Health and Social Agencies, provided invaluable assistance in contributing to the success. This planning required several weeks by the committee and sub- committees.

The sub-committees and their chairmen were as follows:

Medical.....Dr. George Hightower. Dr. R. L. Chamberlain and Dr. Miriam [illegible]vers; Dental—Dr. W. B. Shrotsmre· Hearing—Mrs. Cecile Edwards; Visual—Dr. Clayton Powell; Urinalysis—Mr. R. B. Cleveland; Practical Nurser—Mrs. A. V. Taylor; Height and Weight—Mrs. Annabelle Simons; Volunteers Mrs. J. B. Harris, Hostess—Mrs. Vesta Fuller; Publicity—Mrs. Genevieve Alston; Door Prizes—Miss Charles Anna Gallaway; Exhibits—Miss Estelle Clemons.

Mr. Coleman and sponsoring agencies expressed gratefulness to the huge group of volunteers who worked diligntly each day during the Health Fair. The Students from the Atlanta University School of Social Work gave many hours of work, especially those trained to work with vision specialists. The hearing specialist was supported by the Delta Sigma Theta Sorority.

EXHIBITS, PAMPHLETS

Health exhbits and pamphlets were furnished by Heart Association, American Cancer Society, Foundation for Infantile Paralysis, Commission on Alcoholicism, Maico Hearing Aids, Mental Health Association and Multiple Sclerosis.

Door Prizes and other items were contributed by local businesses to encourage citizens to take advantage of the services of the Fair.

Those working very closely with Mr. Coleman and the committee from the agencies planning the Fair were Fulton County Health Department, Dr. W. N. Harper, Mrs. Carrie Lou McCarter, Mrs. Eula Benning, and M. William Porter; Health Education Department of YWCA, Mrs. Anna Reed, Atlanta Tuberculosis Association, Mrs. Lucy Cherry.

Many telephone calls have been received asking when the Health Fair will be repeated in another section of the city. It is hopeful that the available resources be used and the educational significance will reach far beyond the services offered by the Health Fair, Mr. Coleman said.



POLIO RESEARCHER NELSON WITH JOCK
Chimps Are Used In Polio Tests

CAN BE SWALLOWED

Virus Lab Here Developing Live Vaccine Against Polio

By LILLIAN DeLOACH

Editor's Note: This is the second in a five-part series describing work being done at the U.S. Public Health Service Virus and Rickettsia Center near Montgomery.

A live polio vaccine has been developed at the U.S. Public Health Service Virus and Rickettsia Section here.

It can be swallowed rather than injected; it may produce lifetime immunity. It has proven successful on 13 humans, several hundred monkeys, and about 18 chimpanzees. However, further tests are necessary before the vaccine is submitted for public "consumption."

"I think the live virus will be as much the answer to polio as the smallpox vaccine," says sandy - haired, soft - spoken Don Nelson, who has directed the polio unit over the past two years. "Our next hope, after more tests," he says, "is to give the vaccine to a group of children. But this will be when we're absolutely sure," he says.

The first humans to swallow the new vaccine were Nelson, Dr. Morris Schaeffer, medical director of the Virus and Rickettsia Section; and Dr. Chen Pien Li, former staffer who initiated the tissue culture research which has ended in the vaccine's development.

"We obtained immunity," says Nelson. Examinations of the intestinal tracts of Schaeffer and Li revealed they had few antibodies to begin with, many were produced. Nelson had a "fair amount" of antibodies in the beginning, probably due to a recent infection.

Since that time two years ago, 10 more members of the staff have successfully taken the vaccine.

The virus center here is one of three places where these live virus studies are being successfully carried out. Dr. Hilary Koprowski, director of the Wistar Institute for Medical Research at the University of Pennsylvania; and Dr. Albert Sabin at the University of Cincinnati Children's Hospital are working on the same lines.

Koprowski's vaccine has been tested on the mentally defective and about 100 infants whose mothers are in a reformatory. Sabin has tested his product on young men in a federal prison. Both these vaccines have proven safe thus far, says Nelson.

Tissue culture has made all these studies possible, he continues. A means of growing pieces of tissue from various organs of the body (or from plants) outside the body in test tubes, tissue culture has made it possible to isolate the cells of which a tissue is composed.

This method of growing tissues and cells in test tubes has provided an inexpensive and less time - consuming means of testing viruses. Instead of injecting the vaccine into animals, these tissues may be injected.

Monkey kidney tissues and cancerous cells from humans, especially hela cells, have been used in the tests. These may be extracted from the living source without damage.

Before tissue culture was developed, each injection which produced the disease meant the sacrifice of the animals. Instead of the several days to complete a test which is necessary with tissue culture injections, several weeks were necessary to determine the animal reaction.

The tissues or the cells are merely "planted as seeds in a flask, given the right 'soils, fertilizers, water,'., he explains. Each cell divides, doubling the number put in within a few hours. By twos, they increase thus: two, four, 16, 256, 65,512 and on.

Although the virus cannot be seen with the naked eye, Nelson explains, it can be "photographed" with the powerful electroscope which has been in use only about 15 years.

The presence of the virus is determined by the pathigenic changes observable in the cells it attacks. The salt solution in which the cell is grown will contain a good concentration of viruses once they have degenerated the cell, Nelson explains. This virus - infested liquid is used for later injections.

Developed by Dr. John Anders at Harvard, tissue culture was pioneered here by Dr. Li, who is now at the National Health Institute. Since Li's departure two years ago, the unit has been directed by North Dakota born Nelson. Calm-mannered, lean-bodied, Nelson explains that he came here because this laboratory is "quite unique, one of the few full - fledged virological labs in the world."

About a month ago, Dr. Andrew Fodar, virologist for the U. S. Army in Europe for several years and Ph.D. in bacteriology from New York University, arrived to take over the two polio activites—research to determine the prevalence of the disease and development of the live virus vaccine.

Nelson explains the development of the vaccine thus: Polio is a neurotrophic virus, or one affecting the central nervous system. The first problem in developing an effective vaccine is reducing the virus' affinity for the central nervous system, or weakening this neurotropism. "There's no such thing as 100 per cent," he admits.

But the virus can be weakened so that it won't produce disease. This is done by "passaging" or injecting the virus through animals; and through injections in tissue culture. The two methods "In Vivo," in life; and "In Vitro," in test tubes, are being used at the lab.

Viruses are isolated from animals who have been inoculated with tissues after the virus growth has been determined in tissue culture.

Many different animals were inoculated to determine the virus' ability to produce disease. Then the virus was passed through a series of tissue cultures for several generations and tested again in animals. This was done until the virus lost its ability to produce disease and retained its ability to immunize. Then it was considered a candidate for live virus immunization.

The work here is being done on type one and three polio virus. "There are three types of polio virus which theoretically means one can get the disease three times," says Nelson. Each of the viruses affects humans similarly, he added. The difference is in the virus, not in what it does.

Therefore they are still working to either produce a single vaccine combining the three viruses, or to determine if it will be necessary to administer three different vaccines. Oral administration, in either case, will be simpler.

The "candidate" vaccines have been inoculated directly into the sensitive spine of several hundred monkeys. Chimps have been fed 10 to 100 infecting doses of the vaccine containing from one million to 10 million virus particles. The candidates have been tested up the evolutionary staircase—from test tube to mice, monkeys, chimpanzees and humans. All with success.

"Chimps are more sensitive to polio infections and paralysis than are humans, monkeys more sensitive than chimps," says Schaeffer.

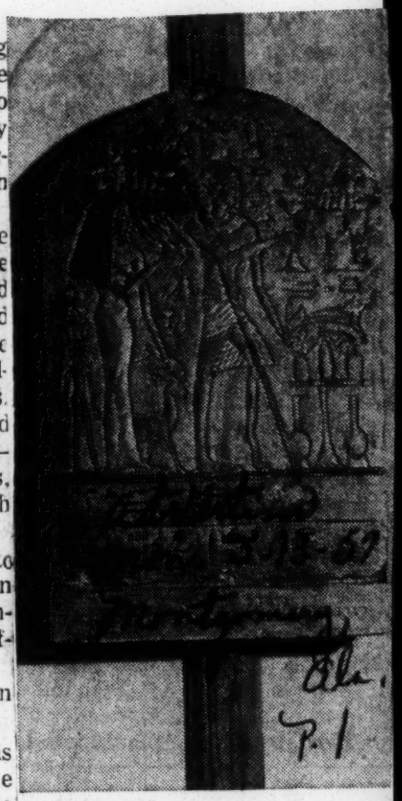
"Experiments must be done in children now," he says.

The three important questions which determine the safety of the vaccine are: "Is the virus capable of producing durable immunity? Is it safe to give to individuals? After it passes through one or two individuals, can it revert back to its former viciousness?"

"We are now trying to answer these questions," he says. Though they feel confident that these questions are within answering distance—they've taken the vaccine safely, obtained immunity, and in all the tests none have reverted to the harmful kind—there are final tests to be made.

Time is an important factor, and no techniques can rush the test required of time. Only as the years pass can a definite immunity be determined.

Only when the doctors are sure will the public be subjected to the life - saving vaccine, the possibile life - time immunity.



EARLY VICTIM

A plaque depicting one of the earliest recorded cases of polio in Egypt about 1350 B. C. hangs on a wall in the Public Health Service laboratory here. A copy of the original in a Copenhagen, Denmark, museum, which was excavated from an Egyptian tomb; the portrayal of a crippled Prince Ruma (making a sacrifice to the Goddess Astarte) bears striking resemblance to a modern-day polio victim.

Final Polio Warning

The United States Public Health Service urges all adults, under the age of 35, or even 40, to get at least one Salk polio shot as protection against the paralytic form of poliomyelitis.

Too many Americans, the Public Health Service says, have concluded that the Salk polio vaccine is for children only and have failed to take advantage of the new serum. Yet the disease strikes many under the age of 35, and even up to 40 years old, and one or two shots — it takes eight months to get the three shots — will provide worthwhile protection.

Therefore, as a last warning, we urge all those under the age of 40 to consider getting at least one Salk inoculation, and preferably two. The National Foundation for Infantile Paralysis thinks that if adults under 40 would do this, the nation could probably experience a summer without a serious polio epidemic for the first time in its history.

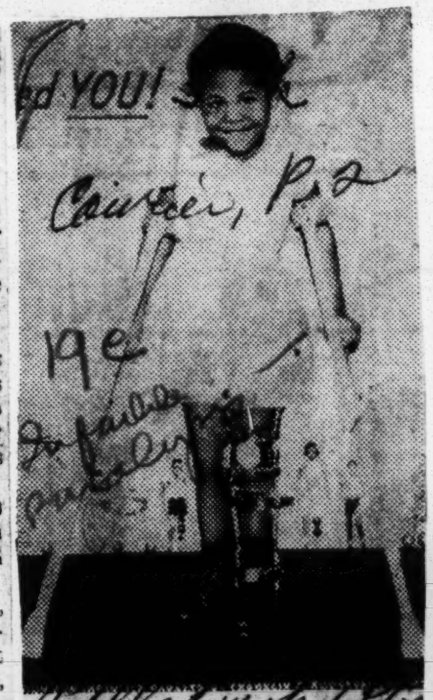
Women Contribute $2,200 To Polio

LAWRENCEVILLE, Va.—(NNPA) The Grand Chapter of the Order of the Eastern Star, Virginia aujrisdiction, contributed $2,200 to the tile Paralysis last week at tis annual convention here.

This last gift brings the women's total contribution in three years to the anti-polio organization to $6,200. Recognizing their generosity the national foundation sent its Field Director Charles Bynum here with commendations and 200 Salk vaccine shots for children and adults of the community, and members of the order.

Approximately 500 delegates, visitors, and affiliated masons attending the three day meeting at St. Paul's College heard Bynum, guest speaker at a public session, say that the OES contributions were being assigned to the George Washington Carver Foundation at Tuskegee Institute, Ala., for research in the fight against polio. A plaque recognizing the order's generous contribution is located in the Carver Foundation Clinic, it was announced.

Otelia Love Jackson, of Charlottesville, Va., grand secretary of the Virginia Eastern Star, reported that the order had contributed over $500 to indigent persons during the past 12 months and is paying off a $500 life membership in the NAACP. She also said the grand chapter and individual lodges are providing college scholarships for qualified Virginians. In her financial report, Mrs. Jackson said the order's cash receipts totalled $205, 576.36.



Poster Girl

Eloise Sturgis, 7, of Augusta, Ga., has been selected poster girl for the 1958 March of Dimes campaign.

POSTER GIRL



Eloise Sturgis, 7, August, Ga., has been selected as Poster Girl for the 1958 March of Dimes. She will represent the thousands of polio patients, stricken in past years, who can benefit from recently developed methods of rehabilitation. Eloise is one of seven sisters and brothers. She enjoys attending school and is a good student.

The 1958 March of Dimes is the sole means of raising funds to support the National Foundation for Infantile Paralysis service program. March of Dimes funds must support in 1958: 100,000 previously stricken polio patients; those who, unfortunately, will be stricken during 1958, in this age of the Salk vaccine; an enlarged professional education program and increased basic scientific research. The 1958 March of Dimes will be conducted Jan. 2-31.

March Of Dimes Leaders Meet At Tuskegee Dec. 4-7

March of Dimes leaders will meet Dec. 4-7 at Tuskegee, Ala., to draft plans for the 20th annual polio drive Jan. 2-31, a spokesman for the National Foundation for Infantile Paralysis announced Tuesday.

Volunteer leaders from Country campaign organizations in North Alabama, Florida, Georgia, Virginia, North Carolina, South Carolina, District of Columbia, West Virginia and Detroit will meet Wednesday and Thursday, (Dec. 4-5'. Volunteers from organizations in Ala,, Mississippi, Tenn., Texas Arkansas, Oklahoma and Louisiana will meet Friday and Saturday (December 6-7-.

"It is estimated that one in three of the 300,000 persons alive today who have had paralytic polio could still benefit from modern rehabilitation."

"The Salk Vaccine has brought a substantial decrese in paralytic polio this year. Funds from the 1958 March of Dimes will be utilized to help those already crippled, those for fhom the vaccine came too late," the polio official said.

Feature speakers at Tuskegee will include: George Voss, National Director of chapters for the National Foundation for Infantile Paralysis; Robert Burcaw, Northeastern regional director; Dr. Herbert T. Wagner, Medical Consultant; Wallace Edgerton, Southeastern regional director and Anne Campbell Starke Detroit Chairman for the Mothers' March on Polio.

Errand of Mercy!

Courier Sat. 8-31-57 Pittsburgh, Pa.

A 19-YEAR-OLD youth, who was given little chance for life a few months ago, today faces a bright and cheerful future, thanks to the devotion of his twin brother, the generosity of several forces in the Midwest, and a decision by the Massachusetts Supreme Court.

P. 6

Leon Masden of Shepherdsville, Ky., a patient at Boston's Peter Bent Brigham Hospital, is not yet completely recovered from the condition which attacked both of his kidneys.

He still faces a long siege of treatment and hospitalization. But today, thanks to his identical twin brother, Leonard, who donated one of his well kidneys to save his brother's life, Leon's chances for recovery are excellent.

Cooperating to give Leon a chance at life were the people of Shepherdsville, who collected a fund of $350 to help the youth, and the Brown-Forman Distillers Corp. of Louisville, who donated the use of its company plane, a DC-3 named "The King Forester," to fly the youth, his mother and brother to Boston.

■

THE STORY started last October, when Leon developed a rare kidney disease, called pyelonephritis, which attacked both his kidneys.

The only hope for a cure, doctors told his mother, Mrs. Flaggie Masden, was a rare operation, performed only three times before, in which the well kidney of another person—usually the operation works only with identical twins — is removed and transplanted to replace one of the sick kidneys.

• Mrs. Masden, a 55-year-old resident of the small Kentucky town, who had reared her eight children almost single-handedly, had no money to pay for the expensive surgery. More than that, doctors told her that the operation should be performed in Boston's Peter Bent Brigham Hospital, where it had been done before.

When the news of Leon's illness spread in the small community, Mrs. Masden's neighbors contributed to set up a fund of $350, and Leon was moved to Louisville's St. Joseph's Infirmary pending arrangements for the operation.

MEANWHILE, Geo. Garvin Brown, president, and Robinson S. Brown Jr., vice president of the Brown - Forman Distillers Corp. hearing of the plight of the family, offered the use of the company's plane and pilots to transport the family to Boston.

On May 28, Leon, his mother and his twin brother, who had offered to give up one of his well kidneys to save his brother's life, were placed aboard the company's "King Forester," and flown to Boston.

• There, while the youths were undergoing pre-operative preparations, a new hitch developed and the Massachusetts Supreme Court was asked to solve this problem.

Because the twins were only 19 years old—below the legal age of consent—doctors were afraid to operate on the well brother, Leonard, to remove his good kidney, for fear that they would open the way for a possible future suit for "invasion" of Leonard's person.

■

ON JUNE 12, Justice Edward A. Counihan Jr. ruled that Mrs. Masden had the right to consent to the operation on behalf of her son, Leonard, and eight days later, the kidney transplant was performed.

A month later, Leonard was discharged from the hospital but his twin brother still has a month more of treatment and surgery facing him. However, doctors hold out great hope for Leon's recovery now, thanks to his brother's well kidney, the contributions of his small-town neighbors and the generosity of a Louisville company.

• For Brown-Forman, it was the second time it had used the company plane to play the part of Good Samaritan.

Just five days before Christmas, 1956, the "King Forester" performed a sudden errand of mercy in flying a 24-year-old woman to a Cleveland hospital for an emergency operation. That flight was performed in weather conditions that had grounded all commercial flights, and closed virtually all airports, east of the Mississippi.



Capt. A. E. Greenamyer, pilot of Brown-Forman Distillers Corp. DC-3, "The King Forester," fluffs a pillow to make 19-year-old Leon Masden comfortable before the long flight from Louisville to Boston where Leon underwent a rare kidney transplant operation that saved his life.



Concern is mirrored in the faces of Mrs. Flaggie Masden, her son, Leonard, and an ambulance attendant, as they carefully take Leonard's twin brother, Leon, from the plane to a waiting ambulance. Leon, suffering from a kidney ailment that threatened his life, is now recovering, thanks to a well kidney donated by his twin brother, and transplanted in a rare operation performed in Boston.



At Logan Airport in Boston, the sick youth, 19-year-old Leon Masden, is gingerly taken out of the "King Forester," a DC-3 owned by the Brown-Forman Distillers Corp. Leon, suffering from a rare kidney ailment, was flown to Boston for a transplant operation that saved his life.



World
Sat. 8-17-57
Birmingham, Ala.
P1

COLLEGE RESEARCH PROJECT GETS $10,000 BOOST — A research project, aimed at increasing the understanding of the way in which the body uses food, now underway at A & T College, last week received an additional award of nearly $10,000 to supplement an original grant of $45,502 to be used over a five-year period. The project, sponsored by the National Institute of Health, U. S. Department of Health, Education and Welfare, is being conducted by Dr. Cecile Hoover Edwards, top center, professor of Nutrition at the college. Assisting her in the work, are, from left to right: Dr. Gerald H. Edwards, staff scientist and consultant, her husband, chairman of the Chemistry Department; Evelyn Gadsden, Winston, research assistant and Mary Lester, Woodsdale, laboratory assistant, a student at the college, majoring in Institution Management in the Division of Home Economics. The group works with special equipment used in the project for the detection of radioactive isotopes.

He Can Take the Rest

It's Something Like This That Shakes a Little Guy

Herald 1-2-B
Miami, Fla. Fri. 8-23-57

By JOHN L. MILLER
Herald Staff Writer

Ten-year-old Auguress Banks is getting used to the little things in life.

Like being an asthmatic since birth. And weighing only 40 pounds. And having maybe only a year to live.

But the big things — like getting your toy bank smashed — shake a guy up.

Auguress is a little Negro lad, a patient in Variety Children's Hospital.

He cherished a small telephone bank, given him by a dear friend, in the way a sick little boy can take a fancy to a special toy. Besides, it had $4 in it. Auguress kept it by his bedside.

Tuesday, he found his telephone smashed and the money gone.

In a way, it's as if fate has had Auguress on its trouble list.

He has been a victim of asthma since birth. He weighs less than half what most kids his age weigh. And doctors had told his mother, Mrs. Martha Banks, 4621 N.W. 24th Ct., he would not live out the year without special attention.

But there was not much mother could do about it. She has a heart ailment and was able to work only a couple of days each week.

There wasn't much daddy could do about it either. He'd lost his 10-year job with Eastern Airlines and was unemployed.

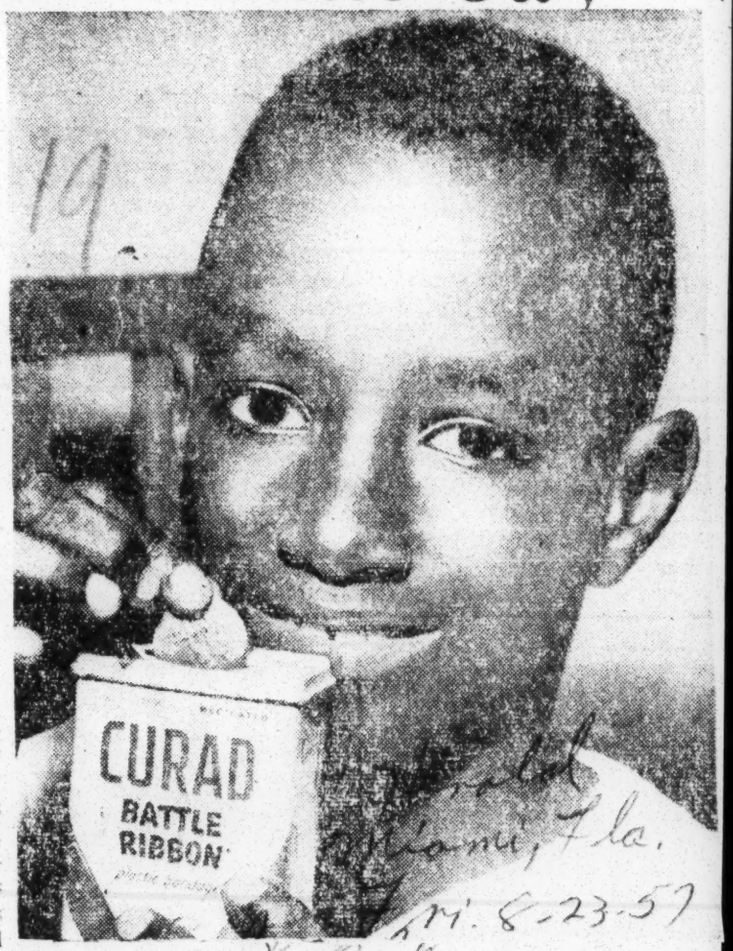
But Auguress' luck began to turn.

A kindly doctor, M. Morton Axler, arranged to have him sent to National Jewish Hospital in Denver as soon as a bed opens up. Meanwhile, he is waiting at Variety Children's Hospital where his mother says they have been "wonderful" to him.

The Coral Gables Elks Lodge pitched in to supply the money for transportation. And found suitable jobs for both parents.

Things sure were looking better.

Then this toy bank business. It shakes a guy up.



Herald
Miami, Fla.
Fri. 8-23-57

A Brand New Quarter, But a Make-Shift Bank
..... for 10-year-old Auguress Banks

Half-Million Chronically Ill Persons Living In N. C.

More Care Needed In Tarheelia

Journal p. 8
Wilmington, N.C.
Sat 5-4-57

ASHEVILLE — North Carolina needs to get busy planning for more adequate care of its estimated half-million chronically ill persons, according to a survey of State health leaders released today at the annual meeting of the North Carolina Conference for Social Service.

"Beyond any doubt the survey establishes the fact that the individuals and organizations participating recognize that the many-sided chronic illness problem in our State is serious, is increasing, and is worthy of the most careful study and planning," the report concludes.

The survey, conducted by the Health Committee of the Conference of which Charles H. Warren is chairman, involved 39 executives and directors of health, welfare and voluntary organizations and units.

The best testimony to the deep interest of North Carolina health leaders in the mounting chronic disease problem is in the response to the questionnaire sent to participants: 41 were distributed; 39 answers were returned — "A possible record for this type of opinion—poll," the report states.

The purpose of the survey was to determine whether chronic disease is a priority concern of the health-welfare leaders, and, if so, to publicize the information "so that action groups with access to funds for more intensive investigation, and with more power to frame plans for the future might be encouraged to begin work."

Listed as major needs in the chronic disease field were more funds for treatment, nursing care, hospitalization, outpatient care, subsistence for the physically limited, chronic disease beds in general hospitals, chronic disease hospitals or pavilions, more nursing homes, boarding homes, and home care service and facilities. Also listed were funds and programs for rehabilitation of chronic disease patients, training for the professional personnel, earlier care-finding to offset chronic illness, earlier treatment, and more health education in chronic disease field.

Change in health insurance policies to embrace hourly nursing of chronically ill patients in the home was stressed, as well as broader health insurance coverage of individuals for long-term illness. One physician suggested that the State needs to "get the General Assembly to provide funds to purchase hospital insurance to cover actual patient day cost for the indigent and medically indigent patient — to include professional services which would be rendered free by physicians to the certified indigent".

Other suggestions of alleviating the problem included extensive research, county-by-county into the chronic illness problem and dissemination of the information gathered; survey of all present services and facilities available and broad publicizing of the data; cooperative planning and corordinated action involving every area of professional service dealing with chronic illness; better communication of needs for the chronically ill to legislators.

In summary, the report declared that "from the thoughtfulness shown in the answers it appears likely that these health leaders are prepared to give creative impetus to any efforts made in the direction of improving the chronic illness picture. It is clear that the participants would seek the advices and judgments of many people, from all areas of health and social service at both State and local levels, in whatever study and planning are done for the future".

Planned Parenthood Serves 156,091 Families In 1956

Daily World Tue. 5-28-57
Atlanta Ga.
P. 2

NEW YORK — More than 156,000 American families came to Planned Parenthood centers in 1956 for birth control services, marriage education and infertility therapy, according to the Annual Report of the Planned Parenthood Federation of America published here this week.

Th report, covering the work of the national federation and its 106 local affiliates throughout the country, noted general increases in service and educational activities. Particularly striking was a gain of 19 per cent in the number of people—mostly engaged couples and newlyweds—who came to Planned Parenthood for marriage education and counseling.

Substantial gains were also reported in the distribution of Planned Parenthood publications which rose to 608,063 copies, an increase of 18 per cent.

"Recent estimates indicate that well over 10,000,000 U. S. married adults in their childbearing years are uniformed or misinformed about medically approved contraception," the report declared. The development of ways to bring information to these groups was defined as the central problem facing the family planning movement in America.

In a quick roundup of experiments with newer methods of communications which Planned Parenthood groups have been conducting, the report cited a variety of different projects:

In Washington, D. C., a Planned Parenthood social worker is making a "person-to-person" approach to mothers in low-income housing development.

In Kansas City, Planned Parenthood volunteers are distributing informational publications at factory gates.

In New York City, a program oriented toward Spanish-speaking groups has increased the patien load 39 percent.

In Kentucky, a nurse-midwif team brings along information an supplies on their regular tours b jeep through remote mountai areas.

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Eagle Thurs, 5-30-57 P.3

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"These programs showed that much more widespread use of existing contraceptive methods can be achieved in the U.S.," the report commented. "Even more apparent, however, was the urgent need to develop simpler, less expensive methods if the goal of 'universal acceptance' of family planning is to be reached."

The report noted the formation of a strong PPFA Biologic Research Committee led by D. Carl G. Hartman, director emeritus of the Ortho Research Foundation, to head up the Federation's program of research for improved methods of contraception and infertility treatment. During 1956, the Federation supported eight research projects in this field.

To make possible these expanded programs, the Federation and its Affiliates raised close to $1.5 million—a 20 percent increase over 1955—in contributions from 52,736 supporters throughout the country. Nationally, the cost of Planned Parenthood fund raising was only 4.6 percent of total income from contributions.

Public Health Service Awarded Research Grants

Daily World Fri. 2-8-57 P.3
Atlanta, Ga.

WASHINGTON D. C. — The Public Health Service announced today that it is ready to accept applications from public health workers for graduate or specialized training for the 1957-58 academic year under the special training legislation voted by Congress last year.

19

The program is aimed at alleviating the shortage of trained personnel in various fields of public health.

In the President's budget, submitted January 16, $2 million is requested for the program in fiscal year 1958 to give additional training to physicians, sanitary engineers, nurses and other professional personnel now working in public health or interested in entering this field.

Congress voted $1 million for the first year of operation of the program and more than 300 traineeships have been awarded, either directly by the Public Health Service or through grants to the training institutions. This includes 16 physicians, 150 nurses, 33 health educators, 25 sanitary engineers, 26 sanitarian, 11 laboratory workers, 10 dentists, and 9 veterinarians.

The traineeships provide, in addition to academic costs and fees, stipends covering living expenses for the trainee and legal dependents. Applicants are urged to submit their applications by April 1, 1957, if possible. Information regarding the program is being made available by the Service's Bureau of State Services, Division of General Health Services.

Grants Announce By Public Health Service

Daily World Fri. 3-1-57
Atlanta Ga.

WASHINGTON D. C. — The Public Health Service today announced 8 grants totaling $90,864 for training in the field of air pollution control. These are the first training grants to be awarded under a 1955 Federal law providing for air pollution research and technical assistance.

19 P.1

The program covers training in both medical and engineering aspects of air pollution and provides funds to: (a) State and local government agencies for training their personnel in this field of environmental health; (b) educational and training institutions for assistance in the development and support of new curricula; and (c) qualified individuals desirous of obtaining specialized training and instruction in air pollution.

For the first year of the training grant program, emphasis is being placed on awards to institutions for curriculum development, in view of the inadequate number of air pollution courses and curricula now available to potentially interested students. Grants to institutions are made upon the recommendation of a panel of non-Federal experts in the field of air pollution.

$151,693 Granted For Sex Research

Post Times Herald
Washington, D.C.

BLOOMINGTON, Ind., April 17 (UP)—The U. S. Public Health Service has granted $151,693 to the Institute for Sex Research at Indiana University for a 3-year study of sex offenders.

19 A-1857

The Institute was founded by Dr. Alfred C. Kinsey, sex researcher, who died last year. Dr. Paul H. Gebhard, executive director of the Institute, said the study would concern an analysis of material gathered previously by the Institute's staff, including Kinsey. It consists of records of interviews with nearly 2000 convicted sex offenders, and court records of the convictions.

The interviews were conducted over the Nation during the last five years.

19a 1957

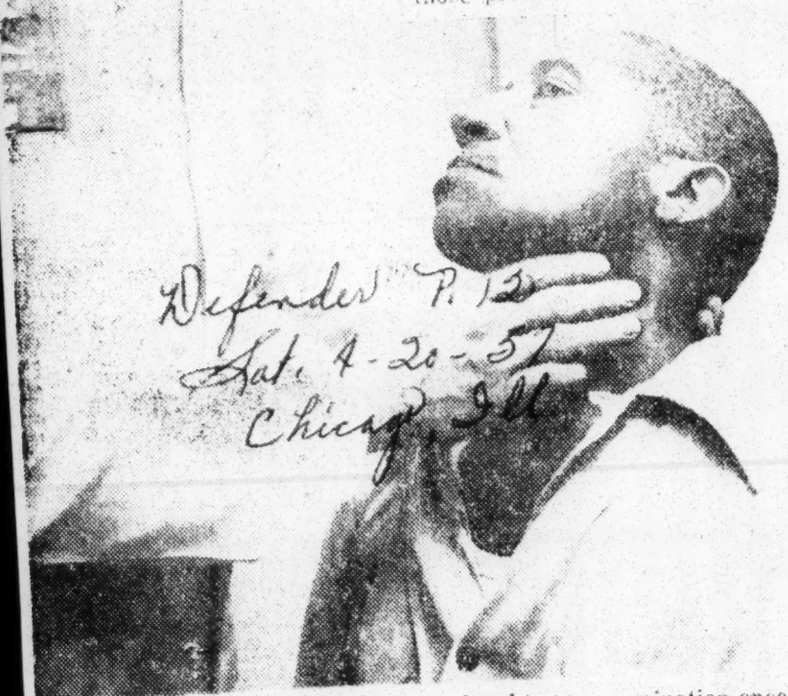
Cancer Respects No Color Line

Cancer is bitterly opposed to segregation. It strikes devastatingly at all groups of people and has one universal objective — to destroy human life. Conversely, the American Cancer Society — through research, education and service — heads a united front to save human life. The Colored people and their leaders, from all corners of America, are a constituent body of that front.

The subjects shown here represent various forces fighting back at this country's No. 2 killer. Some are better equipped to do it in a laboratory or an examining room, others behind the doors of a local club, school or orginazation, while those prominent in the public eye help by national broadcasting and television appears.

No matter what the location, these individuals are an integral part of the battleground and living proofs that, where cancer is concerned, all race barriers have been smashed into oblivion.





DR. FRANK PERRY of Meharry Medical college, Nashville, Tenn., thoroughly examines a patient for any warning indication of cancer. A head-to-toe examination once a year is one of the biggest deterrents to the cancer killer since early detection means a much greater chance of successful treatment.



SINGER PEARL Bailey chats informally with Mrs. Mabel Perry and Tony Quadres of California, two cured cancer cases, before making a television announcement on behalf of the American Cancer Society.



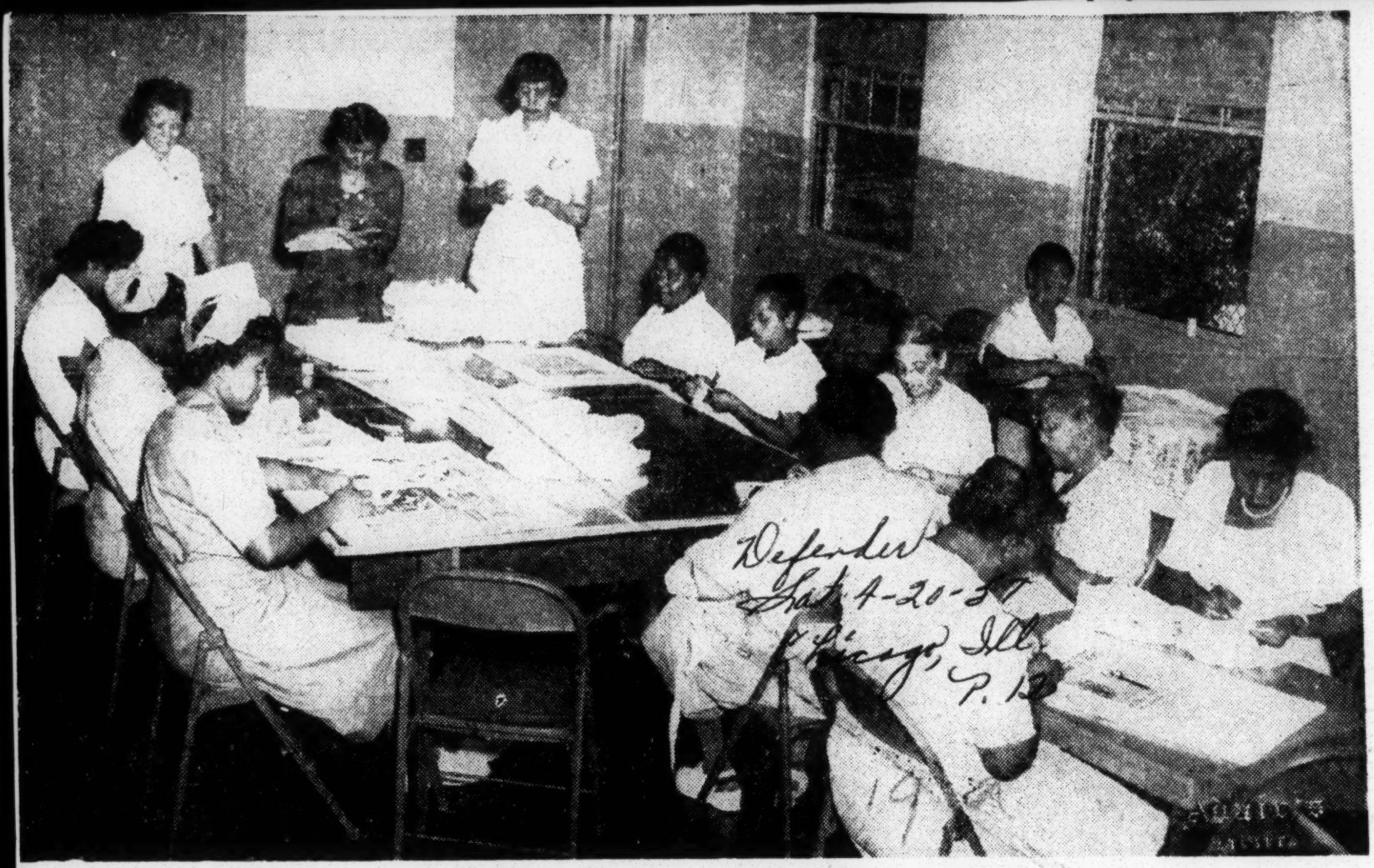
STATESMAN. Dr. Ralph Bunche goes before a national audience to urge them to support the American Cancer Society's annual crusade.



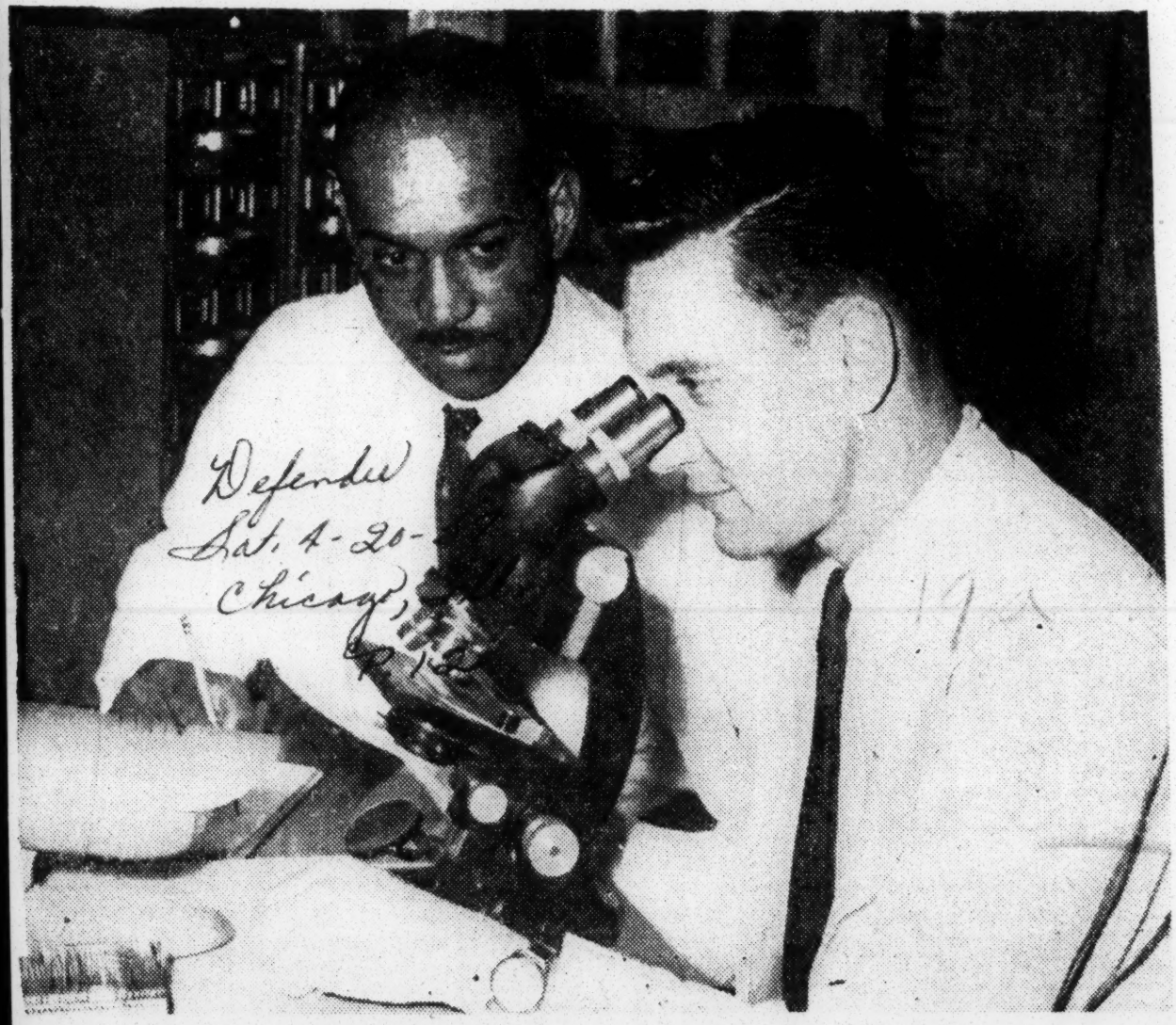
HELPER. Sam MacNeil of North Carolina, delivers vaginal smears taken to determine if adult women show any signs of uterine cancer. He picks up specimens from doctors of women living in rural areas and delivers them to the laboratory.



EDUCATOR. Prof. Ira DeA Reid of Haverford college in Pennsylvania, was elected to the board of directors of the American Cancer Society last November. He encourages schools and institutions of higher learning to be more aware of the cancer problem.


Defender
Sat. 4-20-50
Chicago, Ill.
P. 12
19

SERVICE TO NEEDY cancer patients is furnished by Loyal Fulton as Georgia women are seen busily making dressings. The dressings are valuable to those who have been stricken by cancer.


Defender
Sat. 4-20-
Chicago,
19

RESEACHER. Dr. Randall Bloomfield (left) takes notes in a Brooklyn hospital while his colleague studies cancer tissue under a microscope.

19a 1957



THE FIGHT AGAINST CANCER was the subject of Wednesday's Hungry Club meeting, and here some authorities on the matter are shown viewing slides related to the disease. Left to right, are William T. Mabry, of the Georgia Cancer Division; Robert St. Lawrence, State Fund Raising Director; Dr. George L. Hightower, Edward Bridges, State Director of Professional Education; Dr. Matthew Walker, Meharry Medical College, and Mrs. Matthew Walker.—(Perry's Photo)

Cancer Still Number 2 Killer Medic Says Here

By WILLIAM GORDON

Cancer is the number-two killer among human beings, despite the progress in science to defeat it, a prominent physician and teacher said here Wednesday.

Dr. Matthew Walker of Meharry Medical College in Nashville spoke to a session of the Hungry Club Wednesday through the courtesy of the American Cancer Society. These sessions are held weekly at the Butler Street YMCA.

MORE THAN FOURTH

Dr. Walker warned against neglect of periodic health tests and physical examinations. He said many lives could be saved if people only "moved in time" against cancer. Dr. Walker said more than a fourth of the people, already dead from cancer, could have been saved if they had taken precaution.

The physician referred to the mass screening plan in operation by doctors over the country. He said that in Memphis, Tenn., such a screening process had been in operation and that over 70,000 women had been checked.

"The cure for cancer is left to the individual himself in many instances," he said.

"If we could find the cause of cancer," he added, "we could prevent the spreading of the disease."

WARNED OF "QUACKS"

He warned against the practice of "quacks" and said that one should not take "hearsay" and old remedies as methods of action against cancer.

"Cancer takes both men and women fairly equally, with no regard to race," Dr. Walker said. "However, in certain sites, there are significant instances of susceptibility."

He said men fall victim to cancer of the lung in far greater numbers than do women; a great many more white women have cancer of the breast than non-white women, Dr. Walker said. Excessive smoking of cigarettes was given as a reason.

"About 16,000 American women will die this year of the uterine cancer, most of whom could be saved by early detaction and treatment of the disease.

"The human suffering and economic loss caused by cancer are so widespread that conquering this disease has become one of the gravest problems facing mankind today.

"At the present rate, cancer will strike one in four Americans now living. When a disease so vicious threatens to weaken the collective health and vitality of our nation, we must unite against it with every weapon at our command."

The eminent medic added, however, that 23,000 women are now being saved annually from cancer who would have not been saved 10 years ago. He traced this to advances in science and the improvement of medical techniques.

Dr. Walker praised the American Cancer Society as the voluntary national health agency attacking cancer "on every front through a comprehensive program of research, education and service.

"The society seeks to save lives by educating the public; keeping doctors informed, supporting facilities for detection and treatment within the reach of all . . ."

Can Be Filtered Out

Cigarette Cancer Source Is Reported Isolated

By Prest

PARIS, Feb. 3 (AP)—A French-educated Vietnamese scientist working with the help of American money was credited today with discovering a substance in cigarette smoke which invariably causes cancer in mice when injected into them.

Luckily, he says, this chemical can be filtered out of the smoke.

Discovery of how quickly—and surely—this substance causes cancer in mice was made by Dr. Nguyen-Phoc Buu Hoi, 41, it was announced by the French Academy of Science.

The chemical has the curious identification of 3-4-9-10 Dibenzpyrene. It develops only when tobacco is burned and is one of scores of chemicals making up tobacco "tar."

Buu Hoi, a descendant of the royal family that ruled Annam for generations, is director of the French National Center of Scientific Research, a part of the Curie Institute associated with the University of Paris. Money for the research was supplied in part by the United States Public Health Service.

Dr. Buu Hoi said a less complicated substance, 3-4 benzpyrene, was long suspected United States researchers announced in 1954 that benzpyrene in smoke from cigarette paper caused cancer in mice.

Dibenzpyrene, injected into mice, produced cancer in as little as 42 days, and ultimately every one of the 400 mice developed cancer after injection. With benzpyrene, a dose five times as large required up to six months to produce cancer, and even then it wasn't certain.

The discovery, Dr. Buu Hoi said, establishes 3-4-9-10 dibenzpyrene as the most dangerous cancer-producing agent known. Long at the head of the list was 3-1 dimethyl-7-9-benzacridine, not found in tobacco smoke.

The numerals explain to chemists at just which point benzine is attached to the pyrene base in the carbon compound.

Dr. Buu Hoi was born in the imperial Annamese capital of Hue, distinguished himself in school at Hanoi and was sent here to continue his studies.



MRS. M. W. BUCKNER

Mrs. Buckner Added to Cancer Staff

ATLANTA, Ga., Mrs. Mattie Weaver Buckner has been added to the staff of the Negro division of the American Cancer Society. As field representative for Fulton County, a newly created position, Mrs. Buckner will offer specialized assistance to the many residents of Atlanta and environs whose increasing financial and moral support of the division made the staff increase both possible and necessary.

In announcing the appointment, J. W. Emmanuel, state director for the Negro division, expressed pleasure on the staff increase and seemed assured that expanded services would be available.

Mrs. Buckner is a native of Atlanta and was educated at Morris Brown College.

At The Hungry Club

CANCER INCREASING IN U. S. A., SPEAKER SAYS

BY WILLIAM GORDON
Managing Editor, Atlanta Daily World

Over 245,000 people died from cancer last year, a ranking official of the Georgia Cancer Society, said Wednesday at the Butler Street YMCA.

Lawrence Sullivan, assistant director of the Georgia Division, pointed out some of the growing dangers of the disease and said if treated in time Cancer can be cured.

Mr. Sullivan warned that due to the growing incidence of cancer, two out of three homes may expect to be hit by the disease during 1957. He also said that to date more men die from cancer than women. But he added that the number of women being affected with the disease is now on the increase.

The number of cancer patients in the U. S has increased from 41,000 in 1900 to over 245,000 in 1956.

Mr. Sullivan said one of the best reason as the growing number of older people in the population, coupled with the fact that the cancer death rate (the number of deaths per 100,000 of the population) rises very rapidly with age. The cancer death rate has increased from 64 per 100,000 in 1900 to 145 per 100,000 in 1954.

Mr. Sullivan said one of the best ways to combat the growing incident of cancer was through their education program. He encourged people to check with a physician frequently. Through recent films shown by the Society to groups over the state, he said several cases of cancer have been discovered.

The normal examination for cancer, he added, "is a very expensive operation." The old method of using chest X-ray examinations is out of date and not any longer recommended by physicians in detecting lung cancer, Mr. Lawrence said

Mr. Lawrence recommended as the best defense against cancer that:

Women over 35 should have a complete physical examination once a year followed by a pelvic check-up in six months. All others should have such an examination at least once a year. Chest X-rays of men over 45 should be taken every 6 months.

Substitute for Drug Dosage

Alcohol Spinal Injection Brings Relief From Cancer Agony, Researchers Say

HOUSTON, Tex., March 7 (INS)—A University of Texas medical team today reported a spinal injection of raw alcohol knocks out the unbearable agony of cancer.

Drs. William Derrick and Richard C. Hay said the injection brought complete relief to advanced cancer victims.

The effect, from just a few drops of alcohol, lasted as long as six months before a second injection was required.

They said the alcohol apparently "dries out" the nerve pathways and blocks the transmission of pain feelings to the brain.

The method apparently is so perfected that Dr. Derrick is able to knock out the pain pathways without affecting sense motion and other nerve pathways.

While the injection obviously does not act on the cancerous growth itself in any way, it does offer hope to many of the annual 250,000 cancer victims that cancer's siege need not be a time of agony.

The Texas doctors told the 11th annual cancer symposium of the University of Texas' M. D. Anderson Hospital in Houston that the technique had given very good results in 76 out of 81 cases because the alcoholic pain-killer is easily administered, presents no dangers and can be repeated with no complications.

Narcotics have proved disappointing as a pain killer because the patient always develops a certain "tolerance" to drugs.

One-Two Punch Against Cancer Seems Possible

BY SCIENCE SERVICE

NEW BRUNSWICK, N. J., March 11—A one-two punch against cancer that first will stop its growth and then increase the body's own means of getting rid of it appears possible with a new group of chemicals developed by scientists at Rutgers University, it was reported here today.

The new compounds have not yet been named but they are similar to tem, tepa and mepa, now used to treat certain types of cancer. Both groups of drugs were discovered and developed by Dr. Moses L. Crossley, Rutgers Bureau of Biological Research here.

These new drugs are more efficient against cancer and less toxic to animal patients than the earlier ones, Dr. James B. Allison, director of the bureau, reported.

The plan is to develop a cancer therapy along the same lines that the sulfa drugs and antibiotics have been used against bacteria-caused diseases, he said.

"The procedure has been to use sulfa or an antibiotic to administer a paralyzing blow to the disease, and then let the patient's normal recuperative powers do the rest," Dr. Allison noted.

In cancerous rats, the new drugs stop the cancers from growing and, in some instances if started early enough, the treatment actually causes the tumors to regress. Once this happens, there is a point from which to attack the disease with other forms of treatment such as surgery or diet, he said.

The Rutgers researchers are using dietary methods as the second part of their one-two punch and believe that amino acids, hormones and other types of diet therapy will increase the amount of tumor regression caused by the drugs.

Dietary proteins supplemented with amino acids increase the production of plasma albumin, the activity of certain enzyme systems, and build up protein reserves in tumor-bearing rats, Dr. Allison explained.

Once this protein reserve is built up the regressions of cancers already halted by the new chemicals begin to increase, he reported.

Cancer Society Receives Grant

Every person who contributed to the 1957 Cancer Crusade of the American Cancer society has a stake in the continuing research that will lead to the control of cancer," said Jesse Owens, campaign chairman of the South Central Branch of the A.C.S.

The society announced this week that six grants totaling $19,200 have been made in Illinois to continue this fight.

Additional funds for research grants will be announced later in the year. Reports on contributions to date for the American Cancer Society's programs of research, education and service to the cancer patient will be made at luncheon meeting on April 30 at the LaSalle hotel in Chicago.



MRS. MATTIE W. BUCKNER

Mrs. Buckner Is Named To American Cancer Society

Mrs. Mattie Weaver Buckner has been added to the staff of the Negro Division of the American Cancer Society. Her appointment was effective January 1. As Field Representative for Fulton County, a newly created position, Mrs. Buckner will offer specialized assistance to the many residents of Atlanta and environs whose increasing financial and moral support of the Division made the staff increase both possible and necessary.

In announcing the appointment, Mr. J. W. Emmanuel State Director for the Negro Division, expressed pleasure on the staff increase and seemed assured that expanded services would be available.

Mrs. Buckner is a native of Atlanta and was educated at Washington High School and Morris Brown College. She was formerly employed at both schools as instructor in business education and secretary to the Registrar, respectively. She also studied at many summer schools and has completed an Office Management course at the Central YMCA College in Chicago.

After establishing residence in Chicago, Mrs. Buckner held various positions of responsibility with Selective Service, Adult Education Program, War Assets Administration, Cortz Peters Business College and as secretary, American Red Cross Campaign. Later she held employment as junior case worker, Cook County Hospital and most recently as head mail clerk, Cook County Department of Public Welfare.

Mrs. Buckner's office will be located in the Division's Headquarters, 201 Ashby Street, N. W.

Dr. Horace Goldie Publishes Fine Study On Cancer

Meharry Medical College announced this week that Dr. Horace Goldie, head of the Department of Oncology, and Dr. Matthew Walker, Chairman of the Department of Surgery, had a paper published in a recent issue of Cancer Research. Assisting in the research for the paper, "Effect of Amino-teropteran and of The TEPA on Growth and Implantation of Free Tumor Cells from Ascites Tumors,' were two students, Alvin Graham and Georgia B. Mitchell.

The production of the paper is another step in Meharry's constant progress in cancer research.

WOMEN LAUNCH ATTACK ON CANCER AMONG GROUP

NEW YORK — The Woman's Auxiliary of the National Medical Association announced Tuesday plans in cooperation with the American Cancer Society to conduct a nationwide educational attack on cancer among Negro women.

Announcement was made by Mrs. Charles B. Hayes, president of the Auxiliary.

First step in the program is distribution of a new Cancer Education Program Kit especially prepared by the American Cancer Society for the NMA Auxiliary. The kits will be distributed to NMA State Auxiliaries which in turn will send them to their Locals throughout the nation.

In making the announcement, Mrs. Hayes said:

"As a doctor's wife, I am keenly aware of the heart-breaking and needless loss of life through cancer. I know that my fellow-workers in the Auxiliary share my eagerness to lend every effort to this important life-saving program.

ENORMOUS JOB FACED

"When we face the fact that more than twice as many non-whites die of cancer, we recognize the enormous educational job to be done."

Nearly 16 000 American women will die this year of uterine cancer, although the disease is virtually 100 per cent curable if detected and treated early, according to the Cancer Society.

In its just-prepared Program Kit, the Cancer Society points out that as "key individuals within their communities, the members of the Woman's Auxiliary of the National Medical Association can be of tremendous help. They can urge friends and neighbors to recognize the fact that millions of Americans destined to have cancer in the years ahead need not die if present medical, social and personal resources are put more fully to work."

The kit was designed to serve as an introduction to the Society's program and to prepare the reader for meeting with ACS Division or Unit leaders responsible for community planning.

"Not only will the Auxiliary leader have the latest life-saving information for her own benefit, but she will be equipped with reference material for the guidance and counsel of those in her community,' the kit declares

Research Tracks the Killer

Experts Tell of War on Cancer

World-Telegram & Sun New York 7m: 4-12-57

Surgery or Radiation Saves 1 of Every 3 Patients

This is the second in a question-and-answer series on cancer research. Questions by Pat McGrady, science editor of the American Cancer Society, are answered by Dr. Warren H. Cole, head of the department of surgery, University of Illinois College of Medicine, and a director of the American Cancer Society.

(Distributed by NEA Service, Inc.)

Q: Is cancer curable?

A: Most assuredly. One of every three cancer patients now is saved by surgery or radiation.

Q: Why are some patients curable and others incurable?

A: Some cancers seem to spread very rapidly. By the time the patient and the doctor are aware of them they have seeded distant parts of the body. All cancers spread if they are allowed to grow. That is why early detection and prompt treatment are important. There is still another reason—we believe it may be a very important one—and that is that some cancer cells may be shed by the tumor at the time of operation. If these cells are carried to distant sites and take root they will start new tumors.

Q: Can anything be done to prevent these loose cells from taking root?

A: That is what we and several other groups are trying to determine. We want to know how frequently these cells are shed, what happens to them and how to destroy them.

Q: And how do you propose to do this?

A: It is more than a proposal. At the University of Illinois, we have been employing prophylactic—that means preventive—procedures for the last year and a half or so.

Q. What are the procedures?

A. First of all, we take certain precautions at the time of the operation. As soon as we open up the tumorous area we tie off all blood vessels serving it. This, we hope, prevents cells from getting into the bloodstream.

Q. And how about after the operation?

A. We try to kill loose cancer cells as the end of the operation. In patients having abdominal operations we leave nitrogen mustard in the abdominal cavity at the end of the operation. In patients with cancer elsewhere we inject nitrogen mustard or thio-TEPA into the patients' veins at the end of the operation.

Q. The drug kills stray cancer cells?

A. We hope it kills them. It seeps into lymphatic channels which might be taken by escaping cancer cells. We take a further precaution. We inject the anti-cancer drug into the patient's veins on each of three days immediately following the operation. We hope that if any cancer cells are floating around in the circulation, the drug will overtake and destroy them.

Q: Is there any danger in this method?

A: A theoretical risk. Nitrogen mustard and thio-TEPA destroy bone marrow and may make the patient sick and susceptible to infections. But ours have been safe doses.

Q: Has this method prevented the recurrence of cancer?

A: We don't know yet. We will have to see how many of these patients have recurrences.

Q: What makes you think the method is worth trying?

A: Two things: Experiments in animals and the fact that doctors have found loose cancer cells in the bloodstream.

Q: What makes you think cancer cells get into the blood stream?

A: Dr. George Moore and his group at Roswell Park Memorial Institute are finding cancer cells in the veins leading away from tumors in about 30 percent of the cases. They found the cells both before and after the operation. Only in rare instances, however, do these cells get out into the general circulation. They are filtered out by the lungs or liver and destroyed by the body defenses. This is a most provocative finding.

Q: Does this not make prevention futile?

A. I myself don't interpret it that way. Dr. Moore feels that anti-cancer drugs given at surgery will supplement the natural resistance of the body and increase the chances of the patient's eradicating his own disease.

Q. Is there other evidence that cells might be shaken loose during surgery?

A. Yes. One scientist washed 100 surgical wounds after operation and found cancer cells in 25 and suspicious cells in 14. Another found cancer cells in veins draining tumors in 66 of 107 patients under study. He also found cancer cells in veins draining from the tumor in 78 percent of the patients with moderately invasive cancers and in every single one who had extremely invasive cancers.

Q. Have others besides yourselves tried preventive measures?

A. Yes. A group at the University of Iowa has used radioactive gold at the time of operation for cancer of the prostate; and another group at Washington University in St. Louis has employed radiogold along with surgery and radiation for cancer of the uterine cervix. The results over the last five or six years are quite encouraging. They indicate that some recurrences have been prevented.

Q: Which patients are most likely to be helped by prophylaxis?

A: It is difficult to say. We ourselves are concentrating on cancers of four sites—breast, colon, rectum and stomach. Tumors in these organs are particularly apt to spread by vein; likewise they are very common and recur quite often.

Q: How many surgeons will undertake these experiments in prophylaxis?

A: Twenty of us in various parts of the United States will try various preparations—nitrogen mustard, thioTEPA, TEM and radioactive phosphorous and gold. Some will study cancer of the ovary and lung, as well as the sites we are working with breast, stomach, intestine and rectum. Each will send his reports to the National Cancer Institute. We will do this for the next two years.

Q: And when do you think the significance of these clinical trials might become apparent?

A: We may have some results in a couple of years. Many of these cancers recur within that time. In the meantime we can only hope that the method will work—that the drugs will kill stray cancer cells and that surgery will completely cure the patients.

DECREASE SHOWN IN CANCER DEATHS

Times New York 3-13-57

Treatments, Prevention and 'Obscure' Factors Cited in Memorial Center Report

Steady progress on all fronts in the fight against cancer was reported yesterday by the Memorial Center for Cancer and Allied Diseases.

Optimism was reflected in a biennial report covering the work of the Memorial Hospital, James Ewing Hospital, Strang Cancer Prevention Clinic and Sloan-Kettering Institute for Cancer Research.

"The rates of death from certain forms of cancer are steadily decreasing," said Dr. C. P. Rhoads, scientific director of the center. "Some of these decreases are due to better treatments, some to cancer prevention and some to factors presently obscure."

The war against obscure factors is being waged in the research laboratories of the Sloan-Kettering Institute.

Advances in Two Years

The institute and Memorial Hospital listed these main advances in the two-year period, 1954 to 1956:

¶A new surgery procedure has been effective in 15.5 per cent of "hopeless" cervical cancer cases.

¶The combination of two drugs—mercaptopurine and azaserine—has shown promise in the treatment of children with acute leukemia.

¶Removal of the pituitary gland resulted in improvement in nearly 50 per cent of patients with widespread breast cancer.

¶Direct relationship was shown to exist between smoking—alone or in combination with alcohol drinking—and the risk of developing cancer of the larynx or the oral cavity.

¶Plasmin, an enzyme derived from human blood, has proved effective in dissolving bloodclots. Anti-plasmin, which clots blood, is under investigation as a potential control for hemorrhage.

¶A new synthetic hormone, triamcinoline, appears highly effective in rheumatoid arthritis and useful in leukemia and lymphoma cases. The compound is rated more potent—and has fewer adverse side effects—than cortisone and various derivatives.

Each year an average of 10,000 patients receives treatment in the center's two hospitals. Of 21,871 persons who underwent cancer detection examinations at the Strang Clinic, 124 were found to have cancer. That is six-tenths of 1 per cent. Most had cancer in its earliest, most curable stage.

"We cannot set a time for the final dissolution of cancer," Dr. Rhoads emphasized. "It will not come with a single revolutionary discovery; it will come step by step by constantly piling up gains."

The combined annual budget of Memorial Center and Sloan-Kettering Institute now runs almost $13,000,000—divided roughly $8,300,000 for the hospitals and clinic and $4,700,000 for the institute's research.

GAINS ARE LISTED IN WAR ON CANCER

Times New York 3-19-57

American Society's Report for 1956 Shows 1 in 3 Saved Instead of 1 in 4

Substantial gains in the fight on cancer during 1956 are reviewed in the annual report of the American Cancer Society. It was made public last week.

The society pointed to new statistics showing that "instead of one in four of those afflicted in the United States being saved from cancer, today one in three is being saved."

This means, the report said, that 800,000 persons in the United States are alive five years after treatment for cancer, 700,000 more are being successfully treated for cancer and are expected to pass the five-year mark, and each year 150,000 persons are saved from cancer.

Two factors principally have contributed to this improvement, the report said. Better methods for diagnosis and treatment are more widely available, and efforts to persuade people to see their doctors earlier have had results.

Studies showed, according to the report, "a marked improvement in survival rates for localized cancer, a moderate improvement for cases with regional involvement, and a very slight improvement for cases with remote metastases [transfers]."

The report reaffirmed the conviction that "one-half of all cases of cancer can be cured with present knowledge alone if action of individuals in seeking medical attention is early enough and if the latest and best means of diagnosis and treatment can be made more generally available."

In connection with the society's educational program the main problem was described as "not phobia, or even fear, but rather ignorance on the part of some and simple negligence on the part of many others."

The society especially urged wider use of the cell examination for uterine cancer, which, with adequate treatment, "could prevent a very high proportion of all deaths from cancer of the cervix."

They Beat Cancer

Every year, 150,000 people are pronounced cured of cancer. It takes five years to be sure.

Every day, we read about someone dying from cancer. But we seldom hear of the many thousands of people who are cured of this dread disease.

It is an accepted principle in the medical profession that if you detect and treat cancer early, your chances for survival are greater than if the cancer is detected at a later stage of the development.

THE AMERICAN Cancer Society supports the belief that until after five years have gone by after treatment, without recurrence of the disease, it does not consider anyone cured of cancer.

There are 800,000 Americans who have been saved from cancer, and 150,000 join their ranks each year. On the debit side of the ledger, there are 75,000 Americans who will die needlessly of cancer in 1957, unless they see a doctor in time.

* * *

MRS. NEVA J. DENNIS, of Elberton, Ga., was operated on for cancer in 1947. She is 59, a teacher at the Blackwell Memorial School and the mother of four children. She has successfully beaten the disease.

Another winner in the fight against cancer is Mrs. Floyd Jackson, of San Francisco, Calif. Just 23 years old, she was operated on for cancer in 1947.

Judge Tukes, of St. Petersburg, Fla., who will soon be celebrating his 60th birthday, was declared a five-year cancer cure in 1955. He is married, has one son, and is an ardent gardener.

Weston Ranson of Houston, Texas, a retired Pullman porter, is now 73. He was operated on for cancer in 1950, and is active in the American Cancer Society's publicity campaign, making several radio talks.

Mrs. Eva Bell Brown of Jacksonville, Fla., is a nurse's aide at the Duval Medical Center. Now 53, she was treated for cancer in 1944. She is married and has a son.

These five cases point up the fact that early detection oftimes leads to a cure.

Why are they all alive today, living happy useful lives? Good treatment, proper care, alert nurses and physicians, up-to-date equipment, a willingness to accept the doctor's advice, a will to live?

Their reasons are always factors, but more important, their cancers were discovered early, before the diseased cells had the opportunity to spread to other parts of their bodies.

The Cancer Society's slogan: "Fight Cancer With A Checkup" is a good idea. Try it.

Deaths Elsewhere

Cancer Kills Tippler at 113

HUBER, N. C., May 16 (INS) "Uncle Charley" McLees, an ex-slave who gave up liquor three years ago, died yesterday of cancer at the age of 113.

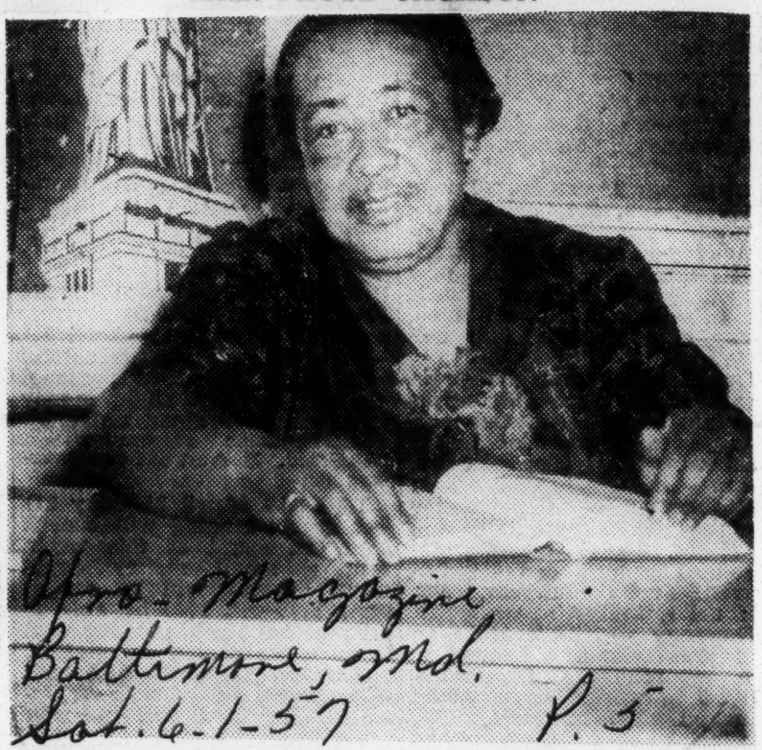
Strong and robust, "Uncle Charley" was active until a few weeks before his death. He was a hack and dray driver for many years.

McLees admitted that he drank heavily during his lifetime. He said he had imbibed "enough to float a ship," but tapered off during his later years.

Townspeople now past 80 recalled that they ran along behind McLees' dray when they were children. He had said his mother, Adeline McLees, died at the age of 111. His grandmother, he said, was 138 years, ten months and two days old when she died.



MRS. FLOYD JACKSON



MRS. NEVA J. DENNIS

Women Warned To Watch Cancer

CLEVELAND — Of the 35,000 cases of uterine cancer diagnosed in the United States next year about 6,000 will occur among Negro women, the American Cancer Society estimated Friday.

Dr. Scott Hill, medical consultant to the national office of the Society, told the National Medical Association at a meeting in the Hotel Hollenden that 26,000 of the new cases of uterine cancer will be cancer of the cervix (neck of the womb) and that 5,000 of the cases will occur among Negroes.

Dr. Hill said that the death rate from uterine cancer among Negro women will be double that of white women. He explained that the chief reasons for this are "economic problems," which keep Negroes from having yearly physical checkups, and "lack of sufficient or adequate facilities" for health examination.

"Consequently," Dr. Hill said, "uterine and cervical cancer will once more account for more deaths among Negro women than among white women. And once more we will have to regard a large proportion of this mortality as unnecessary — as deaths we could have prevented."

Dr. Hill said that at least 70 percent of all uterine cancer patients could be cured if the cancer were diagnosed early and promptly treated. He estimated that virtually all cases of cancer of the cervix were curable if diagnosed in time for early treatment.

NMA Auxiliary To Conduct Nationwide Cancer Program

Journal & Guide Sat. 7-27-57
Norfolk Va.
P 16

NEW YORK — The Woman's Auxiliary of the National Medical Association announced today plans in cooperation with the American Cancer Society to conduct a nationwide educational attack on cancer among Negro women.

Announcement was made by Mrs. Charles B. Hayes, president of the Auxiliary.

• • •

FIRST STEP in the program is distribution of a new Cancer Education Program kit especially prepared by the American Cancer Society for the NMA Auxiliary. The kits will be distributed to NMA State Auxiliaries which in turn will send them to their Locals throughout the nation.

Nearly 16,000 American women will die this year of uterine cancer, although the disease is virtually 100 per cent curable if detected and treated early, according to the Cancer Society.

• • •

IN ITS just-prepared program Kit, the Cancer Society points out that as "key individuals within their communities, the members of the Woman's Auxiliary of the National Medical Association can be of tremendous help They can urge friends and neighbors to recognize the fact that millions of Americans destined to have cancer in the years ahead need not die if present medical, social and personal resources are put more fully to work."

The kit was designed to serve as an introduction to the Society's program and to prepare the reader for meeting with ACS Division or Unit leaders responsible for community planning.

• • •

"NOT ONLY will the Auxiliary leader have the latest life-saving information for her own benefit, but she will be equipped with reference material for the guidance and counsel of those in her community," the kit declares.



NMA Auxiliary Head

Mrs. Charles B. Hayes, president of the Woman's Auxiliary of the National Medical Association, whose organization has announced a cancer educational program for Negro women throughout the United States, in cooperation with the American Cancer Society.



Daily World
Fri. 7-26-57
Atl. Ga.
P. 1

APPRECIATION PLAQUE — An American Cancer Society Certificate of Appreciation Plaque was presented to Mrs. Alice B. Hayes of Niagara Falls, New York, President of the Woman's Auxiliary of the National Medical Association, at the 62d Annual Convention of the National Medical Association in Cleveland, Ohio; Hotel Hollenden. Shown making the presentation to Mrs. Hayes "for notable assistance in the Crusade to Conquer Cancer" is Chester S. Williams, Director of Public Education of the National American Cancer Society.

Awarded $250 a Month

Courier P.T

Dentist's Wife Wins Divorce!

Pittsburgh Sun 6-1-57 19b

BIRMINGHAM, Ala. — Dr. John William Nixon, whose forte is pulling teeth in Ensley, Ala., had $250 per month in alimony pulled from him in Circuit Court here when Judge George Lewis Bailes granted Mrs. Melba Nixon an absolute divorce.

When the dust cleared away from the divorce action which had featured suits and counter-suits, Mrs. Nixon had come away with the couple's fabulous new home, which is well worth up in the five-figure bracket, and Nixon had been ordered to pay alimony.

Under the terms of the divorce, Mrs. Nixon must pay Dr. Nixon $7,500 for any equity that he may have had in their home. In addition, Mrs. Nixon must pay $15,000 to the Nelson Weaver Co. for the balance due on the home, plus $333 to the Aldridge Landscaping Co.

ON THE other hand, the dentist must give Mrs. Nixon's counsel $500 for his services and an additional $516 to M. Thomas Brooks, landscape architect.

The couple had accused each other of physical attacks and mental anguish. They had been married since Dec. 6, 1947, and separated on Dec. 11, 1956. Three children have been born to the couple during the interim.

Mrs. Nixon said that her dentist-husband earned at least $500 per month.

Dr. Nixon has countered with a cross-complaint that he had never committed actual violence or threatened his wife's life.

Mrs. Nixon said that the dentist had refused to give her money with which to buy food or clothing. But, Dr. Nixon charged that Mrs. Nixon came into his office on March 10 and struck him about his head and body, tore off his clothes and threatened his life. He said that she has committed many acts of violence upon him.

Former Boynton Resident Opens Calif. Dental Office

Eagle, Tulsa, Okla. P.1
Thurs 10-31-57

BOYNTON, Okla. — George L. Perryman Jr., D.D.S., formerly of Boynton, announces the opening of his office for general practice of dentistry in Santa Barbara, Calif., at 1525 State Street. The young dentist held open house to the public on opening date, Oct. 19.

Dr. Perryman received his undergraduate degree from Howard university in Washington D.C., in 1950. He entered Howard's dental school in the fall of 1950 and received his Doctor of Dental Surgery degree in 1954.

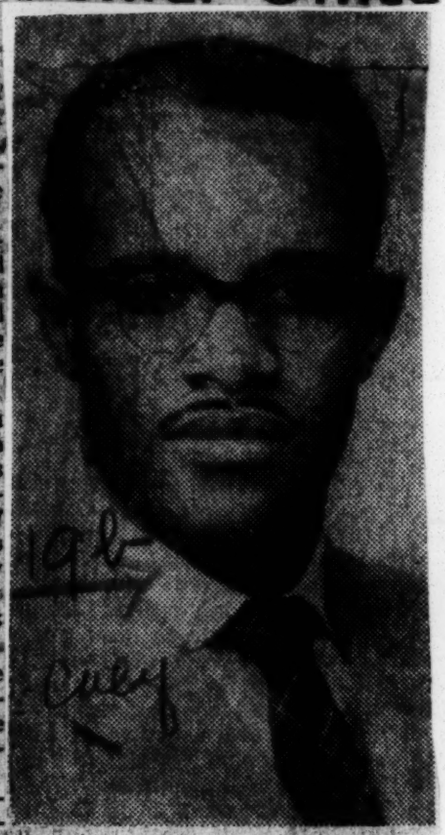
Following his graduation from Howard, Dr. Perryman enlisted in the United States Navy. He was stationed at the Norfolk, Va. Naval Base Dental clinic for 27 months. While there he served as lieutenant junior grade from July 1954 to July 1955 and from 1955 to Oct. 1956 he served with the rank of first lieutenant.

For six months he worked in the operative department while during the remaining 21 months he worked in the prosthetic department.

Dr. Perryman accepted a residency in oral surgery at the Fresno county hospital, Fresno, Calif. in Feb. 1957. The dentist also operated the pedodontics clinic at the same hospital until he opened his present office..

His office is composed of two operating rooms, a reception room, receptionist's office, private office laboratory dark room and rest room. The office is equipped with the latest in modern dental equipment and is located in a newly decorated medical center.

Dr. Perryman is married to the former Juanita Bomar of Spartanburg, S. C. The couple has a year old son, George Leonard III. Dr. Perryman is the son of Mr. and Mrs. George L. Perryman, Sr. of Boonton, Okla.



Dr. George L. Perryman



Dental Meet—

Dr. Harold D. West, president of Meharry Medical College, has returned from Atlanta where he attended a significant meeting of the Commission on Dental Education for the South. He is a member of the commission.

19b 1957

D. C. Dentist Body To Admit First Negroes

Journal P. 4

Sat. 1-19-57

Wilmington, N.C.

WASHINGTON (ANP) — The District of Columbia Dental Society has voted to admit Negro dentists to its membership.

The vote to change its former policy for all-white members was taken by a secret mail ballot. But the actual count had not been made public at press time.

The question of lowering the bars against Negro members was raised after Dr. John A. Turner, chief of oral surgery at Howard University School of Dentistry had filed an application for membership.

Turner said membership in the local society would make him eligible for membership in the American Dental Association which has no racial bars.

Georgia Dentists In Fall Meeting

On Monday morning the Georgia Dental Society opened its Nineteenth Annual Session in the Waldorf Hotel in Atlanta, Ga. with local, state and national clinicians in attendance with the Georgia dentists ninety per cent in attendance.

The morning session was held in the Bamboo Room with the focal points of the meeting centering around the films and lecture of Dr. Hoyt Simpson on "Considerations for Abutments in Partial Dentures". After lunch Dr. Marvin Goldstein spoke on "Hypnosis."

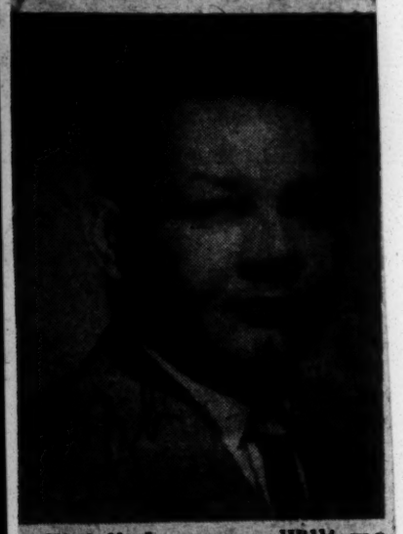
Initial session was called to order by Dr. L. W. Thompson with a welcome address by Dr. Samuel Williams, pastor of Friendship Baptist Church.

Today with Dr. Thompson presiding, committees will be appointed and Dr. James B. Carroll will lecture on "Fluoridation and Civil Defense." The body will hear a lecture on "Aids to Good Surgery" by Dr. Robert L. Bunnen and "Practical Answers to Pedodontic Puzzles" by Dr. Williard T. Hunnicutt.

Wednesday morning minutes of the 1956 session will be read by Dr. G. B. Warren and reports will be made from the Executive Board, Program Publicity, by Dr. A. B. Cooper, Dr. H. B. Smith and Dr. W. D. Brown, Jr., chairmen. Dr. R. C. Cornell will make the treasurer's report. Election of officers and installation will end the meeting.

The roster of officers and Executive Board for 1956-57 includes: Drs. L. W. Thompson, Savannah, president; J. P. Cheevers, Albany, vice president; G. B. Warren, secretary; W. D. Brown, Sr., Newnan, assistant secretary; R. C. Cornell, treasurer; H. B. Smith, W. D. Brown, Jr., committee chairman; J. W. Jamerson, Jr., Savannah, chairman advisory council, D. T. Walton, Macon, State vice president, NDA. Executive Board members are Drs. Cooper, C. F. Goosby, J. W. Houser, E. D. Hamilton, J. E. Carter, Jr., W. B. Shropshire, C. M. Smith, B. H. Atkinson, P. W. Cooper.

Passes Board



Wydell Lawrence Williams, of New Orleans, graduated from Meharry Medical College, school of Dentistry on June 3rd. Dr. Williams, a graduate of McDonogh 35 and Xavier University '49 has successfully passed the Louisiana State Dental Board and is practicing with Dr. B.J. Martin at 2031 Dryades Street.

Dentists Must Elect New Prexy

PHOT SPRINGS, Ark.—(ANP)—The 44th annual meeting of the National Dental association, which convenes in the National Bath hotel here Aug. 4-8, will see a precedent established by delgats in electing a president to fill the vacancy caused by the death, some months ago, of their president-elect.

Dr. Charles M. Thompson, of Chicago, had been named president-elect at last year's meeting, to succeed the present head, Dr. LeRoy W.R. Gates of Darby, Pa. However Dr. Thompson's untimely death last spring, makes it necessary for the organization to not only elect a president for the current year, but also a president-elect to take office in 1958.

Chief speaker for the public meeting of the dentists' meet on Aug. 66 will be Dr. Lawrence Davis, president, Arkansas AM and N college, Pine Bluff.

Dental Group Plans For National Meet

PITTSBURGH, Pa. — Plans for the mid-winter executive board meeting, Feb. 8-9, and the national convention, Aug. 4 - 7, of the National Dental Association, were made at the Penn - Sheraton hotel here last week by Dr. R. Q. Venson, of Memphis, Tenn., chairman of the executive board. Dr. Harry T. Penn, president of Roanoke, Va., and Dr. E. N. Jackson, Charlottesville, Va., secretary-treasurer.



Dr. R. Q. Venson

Dr. W. P. Watson, president of the host society, the Western Pennsylvania Dental Association, had his committee chairman in the conference consisting of Dr. U. W. Williams, convention chairman; Dr. W. C. Waller, chairman of the Scientific Section; Dr. J. K. Lewis, chairman of the Exhibits; Dr. R. C. Boland, chairman of the Entertainment committee; Dr. B. O. Holland, chairman of the souvenir program; Dr. W. McK. Cothbert, chairman of Sports committee; and Dr. R. T. Anderson, chairman of public relations.

The convention activities will be confined to the hotel for the scientific clinics, the Dental Manufacturers exhibits, the business sessions and special gatherings, including the President's banquet.

The President of the Ladies' Auxiliary, Mrs. Lula Haller, was also present in the interest of the affairs of the wives and children attending the convention.

Negro Dentists To Hold Session

WINSTON-SALEM, May 31 (AP)—The Old North State Dental Society will hold its 39th annual meeting June 11-12 on the campus of Winston-Salem Teachers College.

Dr. C. L. Shoffner of Weldon, president of the Negro dentists' association, will preside over sessions. Dr. J. F. Cameron of Kinston is slated to be installed as president for the coming year.

Dr. John S. Pike and Dr. Clarence L. Sockwell, both of the University of North Carolina School of Dentistry, will conduct a workshop and clinic on opening day. Dr. W. H. Allen of Nashville, Tenn., dean of the Meharry Medical College School of Dentistry, will hold a clinic on the closing day.

The women's auxiliary, headed by Mrs. J. D. Hawkins of Henderson, will hold its annual meeting at the same time.

Prominent Pittsburgh Dentist

Courier p 2
Pittsburgh Pa
Sat 9-20-37

Heart Attack Fatal To Dr. Royal Taylor

PITTSBURGH, Pa.—Dr. Royal W. Taylor, 65, one of this city's most successful dentists, died instantly of a heart attack Saturday night at the Loendi Club during a business session of the Frogs Club.

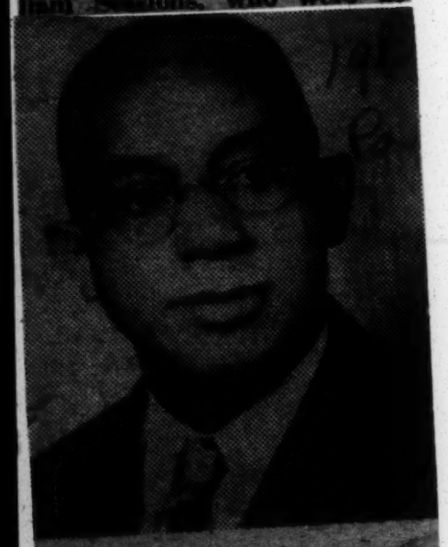
Dr. Taylor, a native of Ellerson, Va., and a graduate of Virginia Union and Howard Universities, suffered the fatal attack just a few minutes after he had lectured members of the Frogs.

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THE DENTIST, who was seated at the officers' table, fell from his chair to the floor almost unnoticed. Once they realized what had happened, members of the club rushed to the fallen doctor and attempted to revive him.

Drs. Charles Cephas and William Sessions, who were attending the meeting, rendered artificial respiration and attempted to arouse the victim's heart with a stimulant. A nearby police ambulance crew rushed to the clubhouse with oxygen equipment, but it failed to produce results.

The deceased was a first lieutenant during World War I, was a member of several national medical organizations and held membership with Alpha Phi Alpha fraternity and Central Baptist Church here. He was not married.



DR. ROYAL W. TAYLOR

Cite Color Bar Against Negro Medics

Courier p. 3
Sat. 3-23-57
Pittsburgh Pa.

WASHINGTON (ANP) — In spite of the nation-wide movement toward integration, it was learned here this week that most of the nation's hospitals continue to discriminate against both Negro physicians and patients.

This fact was revealed at a two-day conference on hospital integration sponsored by three nationally known organizations.

The meeting was held at the Fifteenth Street Presbyterian Church under the auspices of the National Medical Association, through its Council on Medical Education and Hospitals; the NAACP, through its National Health Committee, and the Medico-Chirurgical Society of the District of Columbia.

Racial Bans In Medicine Seen Lifting

Washington D.C.
3-9-57

A foundation is being laid for elimination in the District of race barriers in the health and medical fields, Dr. W. Montague Cobb said yesterday.

Cobb is chairman of the local committee for a two-day National Conference on Hospital Integration that opened yesterday in the Fifteenth Street Presbyterian Church, 15th and R sts. n.w. The conference is sponsored by the National Medical Association, the Medico-Chirurgical Society of the District of Columbia and the National Association for the Advancement of Colored People.

The chairman, in a report points in elimination of racial barriers in medicine. He included the opening, in 1948 of Gallinger Municipal (now D. C. General) Hospital to Negro doctors as attending physicians and members of the resident staff.

Since then, Dr. Cobb said, five of the capital's larger voluntary hospitals have opened their doors to Negro physicians. He noted as other innovations admission of the first Negro nurse in 1951 by the Graduate Nurses Association of the District of Columbia, and the lowering o fracial barriers in 1952 by the Medical Society of the District of Columbia.

There still are hospitals that practice an unobtrusive type of discrimination, he said, adding he hoped that when the new Washington Hospital Center is completed its attitude will be as advanced as its buildings.

Rep. Barratt O'Hara (D-Ill.) said there should be an examination not only of the use of Federal funds contributed directly to hospitals, but of indirect Federa laid through tax exemptions, with a view to ending discriminatory policies.

Rep. Florence P .Dwyer (R.-N. J.) said "microbes, disease and pestilence have no civil rights problem." T. R. M. Howard, president of the National Medical Association, said it "is indeed incredible that men should study together in the same medical schools, take and pas sthe same board examinations together" and yet not be permitted to serve on the same hospital staffs.

Set National Meet On Hosp. Integration

Daily World Atlanta, Ga. Nov 2-22-57

WASHINGTON — (ANP) — Ways and means of achieving racial integration in hospitals will be explored at a national conference here on March 8 and 9.

Co-sponsoring the conference are the NAACP, the National Medical Association and the Medico-Chirurgical Society of the District of Columbia. Dr. Montague Cobb of this city will serve as chairman. Dr. Cobb is a member of the NAACP Board of Directors and chairman of the NAACP national health committee.

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Representatives of all national organizations, both private and governmental, who are directly or indirectly connected with hospital services; the National Medical Society and NAACP branches are expected to attend the meeting.

Review

The meeting will devise a program of action to bring about racial integration in hospitals and formulate a comprehensive statement on the extent and scope of racial discrimination in hospitals as it exists in all sections of the country.

Hospital Discrimination Against Negroes Charged

Evening Star Wash. D.C. Sat 3-9-57 P 22-A

Most hospitals throughout the Nation discriminate against Negro physicians and patients, Dr. T. R. M. Howard, president of the National Medical Association, declared yesterday.

Dr. Howard spoke to the Imhotep national conference on hospital integration meeting at the Fifteenth Street Presbyterian Church, Fifteenth and R streets N.W., at the opening of the two-day session.

He declared very little progress has been made by the Negro race against segregation and discrimination in hospitals and added that "we all know powerful medical and hospital organizations of the country have remained silent on our problem."

Cites New York, Chicago

He said that, in New York, there are more than 100 hospitals and that there are fewer than 10 Negro physicians serving on their staffs. He also charged that in Chicago, the Nation's second largest city, there are "70-odd hospitals" with only seven of them permitting a total of some 15 Negro doctors to serve on their staffs.

The conference, which ends this afternoon, is sponsored by three Negro groups, the National Medical Association, the Medico-Chirurgical Society of the District of Columbia and the National Association for the Advancement of Colored People.

Earlier, Dr. W. Montague Cobb, head of the department of anatomy at Howard University and chairman of the District Commissioners' Public Health Advisory Council, declared the discrimination policy against the Negro "ranges from total exclusion to acceptance in a few cases."

Says Deaths Result

He charged there are some instances in parts of the country when Negroes have been left on the streets or the railroad tracks to die because of this discrimination.

District Commissioner David B. Karrick welcomed the group yesterday morning saying that he hopes "you will achieve just rewards for your efforts for social betterment."

Nearly 100 delegates from various parts of the country attended yesterday's opening sessions. Yesterday afternoon was

Set Meet On Hospital Integration

Defender P. 21 Chicago, Ill. Sat 3-9-57

WASHINGTON, D. C.—Three nationally known organizations will sponsor a conference of nationwide scope on hospital integration in Washington on March 8, 9. The meeting, called the Imhotep National Conference on Hospital Integration, will be held at the Fifteenth Street Presbyterian Church, 15th and R Streets, N. W. It will be under the auspices of the National Medical Association, through its Council on Medical Education and Hospitals, the N. A. A. C. P., through its National Health Committee, and the Medico-Chirurgical Society of the District of Columbia.

Advance registration already indicates a nationwide attendance for the meeting from both urban and rural areas.

Representatives will describe the situation as it exists in their communities from cities including Los Angeles, New Orleans, Fort Lauderdale, Fla., Daytona Beach, Fla., Charleston, S. C., Columbia, S. C., Charlotte, N. C., Wilmington, N. C., Norfolk, Newport News, Richmond, Roanoke, Nashville, Kansas City, Detroit, Chicago, Toledo, Cleveland, Pittsburgh, New York, Batimore and Washington, as well as places of smaller population like Beaumont, Texas, and Oxford, Maryland.

The purpose of the Conference is to get first hand information from various regions of the country on the current status of integration in hospitals of both staff and patient, and through cooperation, study and understanding to recommend positive remedial programs.

Dr. W. Montague Cobb is chairman of the Conference and will preside at the opening session at 10:00 A. M. on Friday morning March 8. At this session the Hon. David B. Karrick, Commissioner of the District of Columbia, will give greetings for the city.

Brief addresses for the sponsoring organization will be given by Dr. T. R. M. Howard of Chicago, president of the National Medical Association, Roy Wilkins, executive secretary of the NAACP, and Dr. Edward C. Mazique, president of the Medico-Chirurgical Society of the District of Columbia.

Dr. Robert S. Jason, dean of the Howard University College of Medicine and Dr. Harold D. West, president of Meharry Medical College, Nashville, Tenn., will make brief statements on what expanded opportunities in hospital facilities will mean for their graduates and the people they serve.

The principal address will be delivered by the Honorable Barratt O'Hara, member of the U. S. House of Representatives from the Second Congressional District of Illinois.

The Friday afternoon session will be devoted to presentations of conditions in various localities by delegates from these areas. There will be open discussion. Saturday morning will be devoted principally to discussion of the reports by representatives of the national organizations attending and resolutions, recommendations and further plans will be formulated.

Dr. Cobb said that the sponsoring organizations are hopeful of achieving far-reaching results through this Conference. Nothing of the kind has been attempted before in this field.

Conference To Explore Hospital Integration

Defender Chicago, Ill. Sat. 3-2-57

CHICAGO, Ill.—(Special)—Ways and means of achieveing racial integration in hospitals will be explored at a national health conference March 7-9, in Washington, D. C.

Co-sponsoring the conference are the NAACP, the National Medical Association and the Medico-Chirurgical Society of the District of Columbia. Dr. W. Montague Cobb is a member of the NAACP Board of Directors and chairman of the NAACP national health committee.

It is expected that among those attending the meeting will be representatives of all national organizations — private and government — directly or indirectly connected with the hospital services, the National Medical Association and NAACP branches.

STATEMENT ON SITUATION

In addition to devising an action program to bring about racial integration in hospitals, the conference also proposes to formulate a comprehensive statement of present hospital discrimination as it exists in all sections of the U. S.

Discussing the need for such a meeting, a conference announcement points out:

"It is still a fact that many hospitals, north, south, east and west, do not admit Negro patients. Others admit them only on a segregated basis. This often means over crowded, poorly equipped wards in older, more or less discarded sections of buildings of substandard maintenance and repair. That traditional abomination the basement ward is still to be found in many places.

"It remains true that in many areas where their services are in great demand, Negro physicians cannot obtain staff appointments to local hospitals because of the color bar, and this irrespective of qualification or section of the country. It is also true that the attempt made in some places to afford limited staff appointments for colored physicians where segregated facilities are proviced for them and their patients is now answer to the problem and an unacceptable approach according to the principles of American democracy."

ENTITLED TO CARE

The announcement expresses the view that "all human beings within our borders are entitled to the same quality of medical care."

The meeting has been designated the Imhotep National Conference on Hospital Integration. Imhotep, an Egyptian physician, architect, priest and scholar, circa 3,000 B. C., is described in the announcement as "the earliest historical figure of importance in medince." His name was chosen, it is noted, "as a reminder that a dark skin was associated with distinction in medicine before that of any other color."

Protest U.S. funds for J.C. hospital

afro american Sat. 2-23-57

Baltimore, Md.

WASHINGTON (ANP) — The question as to whether the Federal Government is prohibited by law to allocate funds for the construction of segregated hospitals has consistently been evaded by Secretary Marion B. Folsom of the Department of Health, Education and Welfare.

This issue which has for some time been discussed on a general basis was recently put to a specific test. The question was raised by Morris B. Gotlin, a Louisiana attorney, regarding a proposed hospital in St. Charles Parish.

The attorney, querried Secretary Folsom on the legality of a bond election to raise matching funds for the construction of a hospital with separate facilities for colored and white, as well as the constitutionality of Federal grants to build a segregated hospital under the terms of the Hill-Burton Act.

* * *

WHEN THE SECRETARY failed to reply to this inquiry, the attorney again asked for clarification on this issue.

Gotlin made it clear that he had no personal interest in the moral issue of segregation, but a little clearification from the Federal Government on the legality of this action would save him much legal work.

When the HEW secretary still declined to reply, the Louisiana lawyer charged the Department with "pussyfooting" or "buck-shifting" on the issue.

* * *

THIS MATTER was brought to the direct attention of Mr. Folsom by an ANP reporter at his press conference, Thursday, who asked that he comment on this situation.

The Secretary stated that the question had never been brought to his attention, therefore, he could not comment. He would look the matter up, however, and take the necessary action.

Talks Slated On Hospitals' Integration

Post and Times Herald Jun. 3-3-57 Washington, D. C.

The Imhotep National Conference on Hospital Integration will be held here Friday and Saturday at the Fifteenth Street Presbyterian Church, 15th and R sts. nw.

Purpose of the conference is to gather regional reports on the current status of racial integration of staffs and of patients in hospitals throughout United States, said Dr. W. Montague Cobb, local committee chairman.

The conference is sponsored jointly by the National Medical Association, through its council on medical education; the National Association for the Advancement of Colored People, through its national health committee, and the Medico-Chirurgical Society of the District of Columbia.

The name of the ancient Egyptian physician was chosen for the conference title for its association with dark-skinned distinction in medicine and also because, translated, it means "he who cometh in peace," conference sponsors said.

The two-day conference will be divided into three parts: (1) Statements of the integration problem by the sponsoring organizations and the schools producing the largest majority of professional personnel; (2) brief first-hand reports on typical local situations from all sections of the country, and (3) discussions of the problem by representatives of hospital organizations and preparation of conference recommendations and resolutions.

Separate Hospitals Hit At Integration Parley

Post Times Herald P. 23 Washington

The first National Conference on Hospital Integration voted yesterday to seek removal from the Hospital Construction Act of a provision permitting the use of Federal funds for construction of separate but equal hospital facilities for Negroes.

Dr. W. Montague Cobb, chairman of the local committee that set up the conference, pointed out that the act, also known as the Hill-Burton Act, already contains an anti-discrimination clause. The conference unanimously adopted a resolution declaring that the separate but equal provision was out of line with the Supreme Court's school segregation decisions and calling for an amendment by Congress to remove the provision.

The action was one of nearly a dozen taken yesterday as the conference ended a two-day session at the Fifteenth Street Presbyterian Church. It was sponsored by the National Medical Association, the Medico-Chirurgical Society of the District of Columbia and the National Association for the Advancement of Colored People.

The conference, with 175 registered from 21 states and 49 localities, also voted to refer to the legal counsel of the NAACP the question of seeking to eliminate the separate but equal provision through a court test.

The conference also voted to keep itself in existence as a continuing body and to select a place for another meeting next year. The local committee, headed by Cobb, with Drs. John W. Lawlah and Joseph L. Johnson, former deans of Howard University's College of Medicine as vice chairmen, was designated to set up the machinery for selection of a permanent conference committee that will maintain liaison with the NAACP and the National Medical Association.

The conference also voted to call attention of the American Hospital Association to resolutions adopted by the American Medical Association urging its constituent societies to take steps to open their doors to Negro physicians; to seek the aid and cooperation of labor, management, religious and other groups in its program for racial integration of hospitals; to ask the NAACP and the National Medical Association to continue financial assistance, and to ask participating organizations to make financial contributions.

Protest Mixed Hospital

CINCINNATI — Forty patients have protested integration of Negroes and whites at Bettman Tuberculosis Hospital. Dr. Herman Nimitz, hospital superintendent, said he told the dissatisfied ambulatory patients they were free to go home when they choose.

19d 1957

ALABAMA

HOSPITAL PROGRAM OK-ED IN ALABAMA

Passes House Group — Voters To Decide Financing

BALLOT ON TAX PLANNED

By The United Press

MONTGOMERY, Ala., July 10.—The House Constitutions and Elections Committee Wednesday approved legislation to underwrite a broad public health and hospital building program.

The program, introduced by Representative Karl Harrison of Shelby County, would be submitted to state voters for approval of a proposed additional five-mill property tax to finance it. Representative Harrison estimated the tax proposal, ratified, would bring in 12 million dollars a year.

The plan calls for a five-member state board composed of three lay members and two doctors to administer the program and allocate funds through existing state and county agencies.

The Shelby representative said the program would make possible construction of needed regional hospital facilities to meet the "urgent needs" of the people and help pay the medical expenses where such help is needed.

More Hospital Beds

Representative Harrison said the measures would make possible 1,000 hospital beds in Birmingham, 750 beds in Mobile and 500 beds in Montgomery with additional smaller regional hospitals at key locations throughout Alabama.

Several committee members said they believed there was "little chance" the voters would approve an additional property tax but agreed to pass the question on to them.

"The people have never voted down an important health program where they were properly informed about it and understand the needs and significance of the program," Representative Harrison said.

The series of bills would supply some four million dollars to supplement an indigent patient hospital program already approved by the lower chamber. The money would be matched on a dollar-for-dollar basis with Federal funds.

Auburn would get 4½ million dollars for construction and equipment of a research laboratory. The laboratory would carry out research in plant and animal diseases affecting humans.

Another two million would bolster funds for the state's mental hospitals to provide additional beds and needed drugs and equipment.

Training Program

A program for training 300 additional nurses each year would be financed with $480,000 of the proposed revenue.

The University of Alabama Medical Center in Birmingham would be given grants for various educational and medical care programs.

Some $400,000 would be allotted for expanding medical college services and employment of additional faculty.

Gov. James E. Folsom signed into law Wednesday a legislative act exempting cattle and other livestock from ad valorem taxes. The legislation was endorsed by farm leaders throughout the state after the State Supreme Court ruled cattle were subject to the tax.



PROPOSED BAPTIST HOSPITAL — The architect's drawing of the proposed 200-bed Baptist General Hospital to be erected on the Southern By-Pass in Montgomery is shown above. The Macon County campaign committee, headed by Dr. W. D. Ogletree, has set a goal of $1,500 in pledges. Campaign workers have been enlisted and March 11 has been set as the starting date for solicitation. Campaign leaders emphasized that a single, joint campaign will provide funds for both the hospiatl and a Crippled Children's Clinic. People of all religious faiths will be contacted and no public funds or tax money of any kind will be used for the erection or operation of the hospital, according to leaders of the project. Montgomery Baptists have provided the building site and have assumed responsibility for raising half of the required $3,000,000. It was pointed out, however, that these facilities cannot be built without the help of the citizens of all denominations and the general public is being asked to contribute the remaining $1,500,000.

Though The Day Of The Small Private Hospital Is Past, Dr. Hubbard Has No Retiremer Plans, Now Or Ever; He Will Continue Active Practice With His Son On Forest Avenue

DR. T. BRANNON HUBBARD SR., who at 15 was rejected from Annapolis for being "knock-kneed, pigeon-breasted, generally a poor specimen," is now a charming and gracious 70-year-old with an illustrious career as a Montgomery surgeon.

On the threshold of another giant step, as most of the doctor's agile steps have been, he is looking forward to an indefinite continuation of surgery, cancer study, and horseback riding.

Born in Montgomery on Feb. 9, 1887, young Hubbard spent his early years wanting to be a doctor, attending a "few private schools," and matriculating through famous old Starke's University School from age 10 to 15.

"As many prominent men in Montgomery have been educated at Starke's as there have been babies born at Hubbard's," says Dr. Brannon with a twinkle, unabashedly classing himself among the city's elite. Which of course he is.

WASHINGTON & LEE '06

IT WAS at Starke's that he received the foundation in mathematics and Latin which allowed him a year's credit on those two subjects at Washington & Lee University, where he received an A.B. degree, "academic," in 1906.

He spent only three years in undergraduate study, the first year on scholarship, the last year as an instructor in the mathematics department.

"I don't know what it takes nowadays," he says laughingly as he tells of the offer of a professorship in mathematics and instructorship in Latin from a Texas college when he was only 19.

But it was time for medical training to begin. Choosing between Johns Hopkins and Columbia University's College of Physicians and Surgeans, he finally selected New York where a "poor Southern boy might learn something."

EUROPE ON A BICYCLE

IN 1909, the year before graduation from Columbia, he went with a wealthy old man to Europe: "Just his wife, valet, maid, bulldog and me."

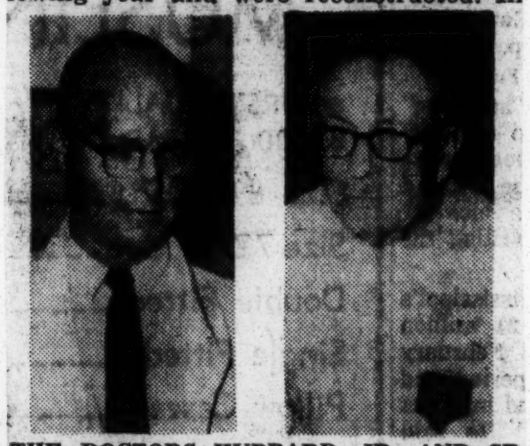
After his official duties with the family were ended, he launched off alone to see Europe by bicycle.

After two years internship at St. Luke's Hospital in New York, he returned to Montgomery where he practiced with Dr. Isaac L. Watkins at Highland Park Sanatorium, or "Watkins Infirmary," as it was popularly called. This later became Hubbard Hospital.

Between 1917 and 1919 he served as first lieutenant and captain in the U.S. Army Medical Corps at the Base Hospitals of Camp Sheridan and Camp Pike.

Then back to Montgomery to "buy out Dr. Watkins because I had no place to operate." (Dr. Watkins' health was failing at this time and he retired soon afterward.)

The three frame buildings constructed by Dr. Watkins in 1894 on Forest Avenue opposite Oak Park burned the following year and were reconstructed. In



THE DOCTORS HUBBARD—JR. AND SR.

1919 when Dr. Hubbard bought the facilities, there were four frame buildings.

In 1927 the fireproof brick and stucco building on the northwest corner of the property connected the then five buildings of Hubbard Hospital. For a time Dr. C. Hilton Rice used the corner building of Forest and Pine for a pediatric hospital.

After World War II, three of the frame buildings on the southern half of the block were sold to Dr. B. F. Jackson and his son who began the construction of Jackson Hospital.

TO CONTINUE PRACTICE

AND thus began the present move which will close the 63-year-old Hubbard Hospital. This will not mean the end of Dr. Hubbard's career.

The offices where he and Dr. Brannon Hubbard Jr. have practiced together since the early 50's will remain open

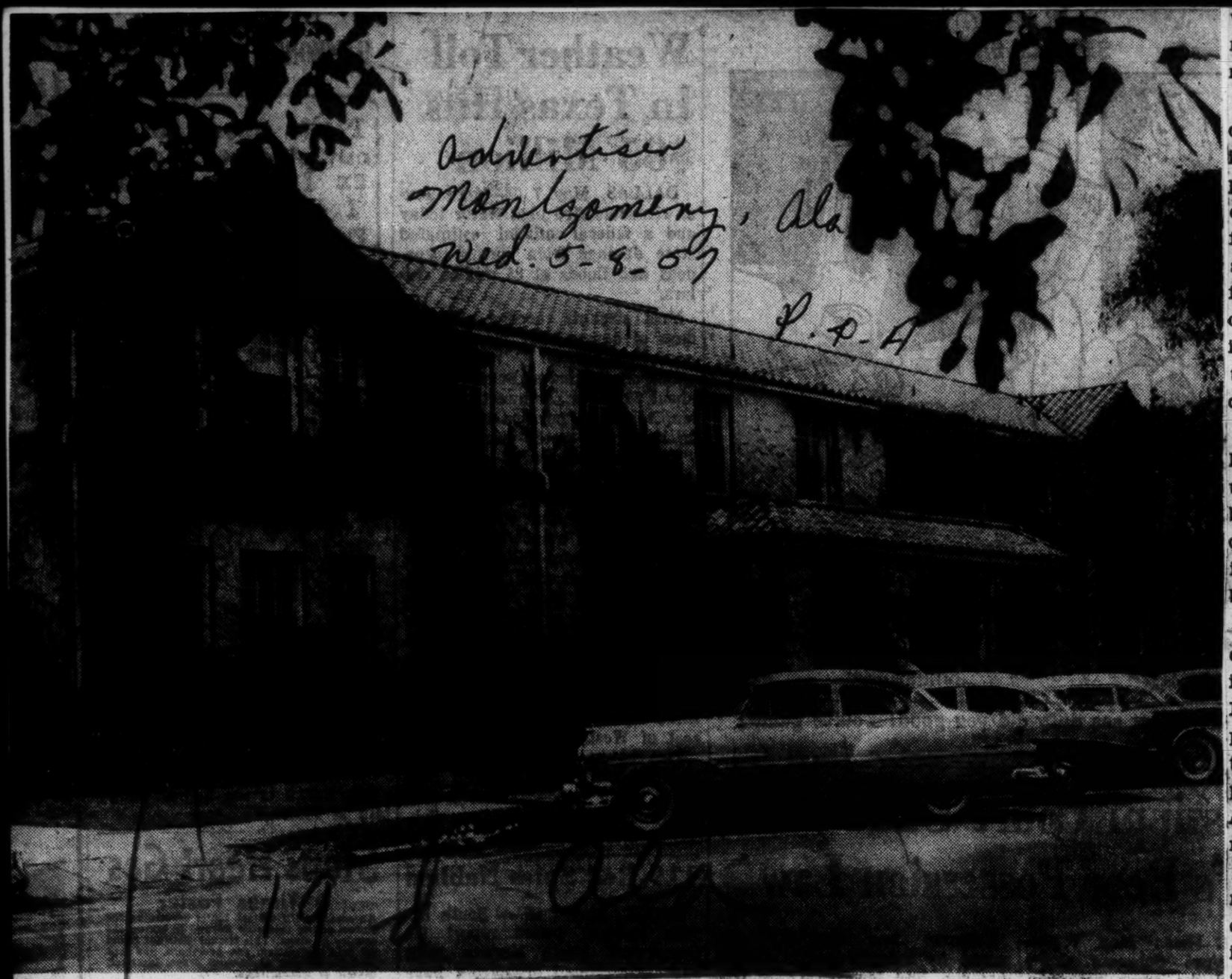
Their surgery practice, and the Oak Park Tumor Clinic which Dr. Hubbard Sr. serves as director, will continue.

"For some years it has been evident that small private hospitals have had their day," Dr. Hubbard Sr. explains. Formerly, with the scarcity of beds in Montgomery it was felt that Hubbard Hospital was useful to the community.

"But now, with the advent of St. Jude's, the additional facilities of St. Margaret's and Jackson's and the imminent building of the Baptist Hospital, this seemed to be a good time to discontinue the operation of Hubbard Hospital."

No plans have been made concerning the disposal of the quaint old buildings. It is probable that Dr. Hubbard wants to get used to the idea before that move is made. It's a big move, like the turtle giving up its shell.

The robust, soft-spoken, Dr. Hubbard, says that young Hubbard Jr. has "wonderful coordination and brains that I've always wished I had." This is sheer modesty. "I just work harder," replies



HUBBARD'S HOSPITAL

The Closing Of Hubbard Hospital

his son.

A tall, graceful man, usually clad in the blues or brown tweeds with three-button coats tailored to his specifications by Cunningham the Tailor, is a striking figure in any crowd.

The slow, sympathetic "no" he gives the questioner asking "Do you ever plan to retire," is typical of his attitude toward his work. "I've got to work," he says.

Though he wants to travel "just about everywhere," he's given this idea up since his wife has been ill.

PROF. HUBBARD, M.D., Ph.D.

HE AND young Hubbard, who is one of the few doctors in the South with a Ph.D. in surgery as well as an M.D., will continue their service from 1211 Forest Avenue. Dr. Hubbard Jr., who is an assistant professor of clinical surgery at the University of Alabama Medical School, will continue to spend one quarter each year in residence there.

Operating facilities of all the city's hospitals will be used—St. Jude's, St. Margaret's, and Jackson's; later probably the Baptist Hospital.

But the Hubbard tradition of medicine and surgery, as well as cancer treatment will continue — though the colorful stucco hospital may vanish.

The Indigent Hospital Bill

THE failure of the Alabama legislature thus far to take any positive action toward the enactment of legislation proposing a statewide indigent hospital program is not due to any groundswell of opposition.

As yet no organized opposition has developed, nor is any expected. The inactivity of the legislature on this question is due entirely to a legal technicality, and until the question is resolved by the Supreme Court the bills which would embark the state on this commendable venture will remain in committee.

At stake in an advisory opinion requested of the court by the legislature is the legality of counties financing their part of the indigent program with proceeds from existing local taxes levied for "hospital purposes." Many counties already have such taxes imposed to finance the construction, equipping and operation of hospitals. But whether it is lawful to use such tax money to pay the hospital bills of the needy is a question for the court to decide.

A proposed constitutional amendment has been introduced which make such use of the hospital tax revenue legal, but if the court rules that these expenditures are now acceptable under existing statutes then this measure would be unnecessary.

The indigent program will not—as envisioned by some misinformed—result in free hospitalization for one and all. Instead it is designed to pay the hospital bills (with no profit included) of the needy ill. Realistically speaking, the program is as much for the relief of Alabama hospitals as it is for Alabama's needy.

For example, in 1955 Alabama hospitals rendered service to indigents at a total cost of $7,000,000 of which they were reimbursed only $4,000,000. The remaining $3,000,000 was left for the hospitals to make up through higher rates and poorer service for the paying patients.

As now contemplated, Alabama's proposed move into this field would be modest at the start—a state appropriation of only $500,000 has been recommended by Gov. James E. Folsom. Under the state-county matching formula proposed ($125,000 to be divided equally among the 67 counties, the remaining $375,000 matched dollar-for-dollar with the counties) the maximum amount which could be available is but $875,000.

But modest though it may be, the program's enactment by the legislature would be indicative that recognition has finally been given this real and deserving problem.

Hospital Progress

THE CURRENT CAMPAIGN to raise $1,500,000 as the public's share in the proposed Baptist General Hospital & Crippled Children's Center focuses attention on the present status and recent progress of hospital facilities in the U.S.

According to a bulletin of the Health Information Foundation, there are now 4.2 general hospital beds per 1,000 persons in the U.S. This comes close to the generally accepted optimum of 4.5 per 1,000. In 1909 the national ratio was 2.5 per 1,000. Thus facilities for the nation as a whole have increased 200% in 48 years.

Unfortunately, Alabama is one of those states which has not kept pace with the times. It is numbered with the following states which have the fewest number of beds on a population basis: Maine, New Jersey, Ohio, Indiana, Kentucky, Tennessee, Mississippi, Alabama, South Carolina, Georgia, Arkansas and Utah.

The Hill-Burton Act has been responsible for much of the recent progress, but certainly not all. Most of our hospitals, like the proposed Baptist hospital, are built without federal assistance. In 1957, for instance, a huge $740,000,000 in new hospital construction will get under way. Only about $195,000,000 of this will be with federal aid. The rest, $545,000,000, will be privately financed or financed by local governments.

Aside from the population increases which necessitate all this construction, there is another reason for the hospital boom. Twenty years ago, six out of every 100 Americans were hospitalized for varying periods during the year. Today the date is 13 for each 100, or more than double what it was in the mid-30s.

Looking at this last fact, you wonder how hospitals have been able to carry on as well as they have. One reason has been the discovery of new drugs and techniques which have sharply reduced the average length of hospital stay.

But the load continues to mount and more beds is the only answer. Particularly is this true in states such as Alabama where hospital facilities are far below the national average.

To those interested in the Crippled Children's Center, which will be an adjunct of the new Montgomery hospital, it is worth noting that the most acute shortage of hospital facilities in the nation is in rehabilitation centers. The proposed Center will offer Central Alabama's first rehabilitation facility of this kind, including occupational therapy and vocational counseling as well as physical therapy, speech therapy, etc.

With the new hospital Montgomery will move closer to the national level.



WORKING THE THREADING MACHINE! — These three Sisters of St. Joseph who help staff Good Smaritan Hospital in Selma were caught by the photographer as they experimented with a threading machine during construction of the hospital's new Old Folks Home. They are, left to right, Sister Margaret Isabel, S.S.J., Sister Joseph Clare, S.S.J., and Sister Mary Alonzo, S.S.J.

The Good Samaritan Hospital, Selma, Alabama, has now under construction a Nursing Home for the aged and chronically ill in the Selma and Dallas County area.

Work is being sponsored by the Fathers of St. Edmund and under the administration of the Sisters of St. Joseph.

The new hospital facilities will cover approximately 7,000 square feet and will be a one-story structure, built of constructional slab with radiant floor heat, light weight walls and roof, brick veneer and fire-proof throughout. The interior will be of metal lath and plaster interior finish, with ceramic tile floors and wainscot.

The 26-bed Nursing Home will be an addition to the present Good Samaritan Hospital. During construction period the old folks will be moved to a convalescent unit. The new building will provide only those facilities necessary for the operation of the Nursing Home and that are not now provided in the general hospital.

* * *

FOR A NUMBER of years the Good Samaritan Hospital has been providing a limited service to the aged in the Dallas area.

The need was indicated as a result of a State Survey which showed the need for 133 Nursing Homes to take care of the Negro population; 26 beds being designated for the Selma area.

The proposed project will offer skilled nursing care and will fully meet the regulations of the Public Health Service.

* * *

MEDICAL SUPERVISION will be under the medical staff of the Good Samaritan Hospital and the services provided will be as follows: utiization of existing facilities, administration, dietary, laundry, medical staff, plant operation, maintenance and other hospital services as needed.

Social Service will be provided with the local Welfare Department and Family Service.

The administration will be under the Sisters of St. Joseph with the overall sponsorship of the Fathers of St. Edmund. The nursing staff will consist of two part time registered nurses, four licensed practical nurses and the present student body of the Practical Nursing School.

* * *

THE OVERALL COST is approximately $175,000; two-thirds of which was supplied under the Hill-Burton Act through the cooperation of the State Department of Health and the remaining one-third provided by the Fathers of St. Edmund and the Good Samaritan Hospital with the use of a partial grant from the Ford Foundation. It is anticipated that the completed structure will be ready for occupancy during March of 1957.

The Good Samaritan Nursing Home was first opened in a small frame structure in Selma shortly before Christmas in 1943 when six old folks were admitted. Since that time 76 old folks have been provided with every care.

The new hospital addition will provide both two and four bedroom living quarters for the occupants. Also there will be provided a large sun porch, approximately 14 x 30, for recreational and occupational activities. The Nursing Home is unit No. 2 in the overall plan of four.

The total bed capacity at the completion of the Nursing Home will be 111 beds. The Home is conducted by the Sisters of St. Joseph of Rochester. There are five Sisters in charge, 33 nurses and 25 student nurses. The Sisters of St. Joseph came to the Diocese at the request of His Excellency, Archbishop T. J. Toolen, Archbishop-Bishop of the Diocese of Mobile-Birmingham.

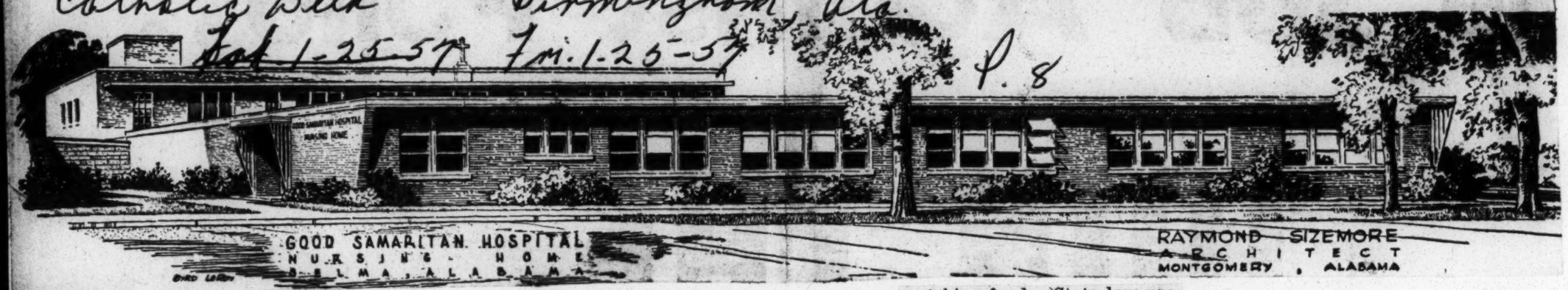
In 1944 the original Good Samaritan Hospital was purchased from the Baptist Hospital organization by the Fathers of St. Edmund. In 1946-47 the 85-bed unit was completed and dedicated in March of 1947.

Hospital services rendered during the year ending Dec. 31, 1956:

Total patients	3,865
Total days cared for	19,775

Construction Of 26 Bed Nursing Home For Aged In Selma

Catholic Week Birmingham, Ala.
Sat. 1-26-57 Fri. 1-25-57 p. 8



Alabama Pushes Program For Indigent Hospital Care

Journal & Constitution 2-17-57
Atlanta, Ga.
Sun. 2-17-57

Group Studies Plan for Tax Hike, $1.7 Million State Appropriation

By FRED TAYLOR
Staff Writer, The Birmingham News
Special to The Atlanta Journal-Constitution

MONTGOMERY, Ala., Feb. 16—A multimillion-dollar indigent patient-care program is being pushed in Alabama to help provide urgently needed hospitalization for those unable to pay for it.

It has the strong backing of the Alabama Hospital Assn. And it is being considered favorably by a legislative interim committee set up to help solve this acute problem.

Other groups, including the Birmingham Health Council's indigent care committee, are plugging hard for the program.

Latest plan outlined to the joint House-Senate committee, which has devoted many months of study to the problem, calls for:

1. A legislative appropriation of $1,700,000 state funds yearly, to be matched by an equal amount from all the 67 counties, to provide "a minimum hospitalization program for indigents." The total would be $3,400,000.

This proposal was offered by the hospital group, with no specific recommendation as to how the money would be raised.

ALABAMA

2. Authorization of an additional one-mill ad valorem tax for indigent patients through a constitutional amendment, which would have to be approved by voters.

This would give each county the right, by a subsequent vote in any particular county, to levy the additional tax.

Jefferson County Need

Populous Jefferson (Birmingham) County, which already appropriates more than $700,000, matching funds yearly out of its general fund for this purpose and which desperately needs more money to care for a heavy load of indigent patients, would be able to raise $650,000 more through a one-mill ad valorem tax increase.

The hospital organization urged that any law enacted should contain a provision enabling the state to participate in any federal programs which might be made available in the future.

Actually, Alabama hospitals, including all private infirmaries, last year absorbed or charged to paying patients more than $3,200,000 in costs for treating indigent patients.

There were 49,778 totally indigent (unable to bear any costs) or medically indigent (able to pay part of costs) patients treated in Alabama hospitals last year.

The state already is appropriating, from funds provided for the State Department of Pensions and Security (public welfare), approximately $10 a month for medical care for those 65 and older who are on the old-age assistance rolls.

This amounts to $465,000 a year for the program at University Hospital in the huge Medical Center at Birmingham. This tends indirectly to bolster the teaching program at Alabama Medical College, which is part of the University of Alabama.

As the hospital organization pointed out to the legislative committee, a pattern of aid already has been provided at the county level in Alabama. Ad valorem taxes up to four mills (40 cents on each $100 property tax valuation) already are in force in a number of counties.

$7 Million Needed

The association report, submitted by J. Frank Bynum of Enterprise, its president, stated that "this seems to be a good source for obtaining county matching funds. State law provides that money from the general fund of the county may be appropriated for indigent hospital care."

Bynum and G. C. Long Jr., association executive director, pointed out that a survey made by the organization indicated that more than seven million dollars yearly would be needed to care for indigent patients.

This survey included a check of 87 Alabama hospitals which showed that the over-all load amounted to $4,800,000 for completely indigent patients and $2,400,000 for medically indigent.

19d 1957

ARKANSAS

Moton Gets New Elevator West Reports

Moton Memorial hospital will have a modern, new electric hydraulic elevator in operation within the next few days according to hospital administrator, J. T. A West.

Purchased from funds granted by the Ford Foundation, the elevator will replace the old hand-operated dumb-waiter type that was originally installed. The new elevator has been in the process of installation for the past three months.

Also, by way of improvement, a 12-foot neon sign, bearing the name Moton Memorial Hospital, has been installed over the front entrance of the hospital. This was purchased from hospital funds.

Bright New Plans

Given impetus by new board member Tuabmann of the Buffalo Oil company, a master plan for beautification of the hospital premises is in the mking...

A hospital auxiliary composed of volunteers who want to help in the general improvement program is being organized. The group will be sponsored by board members Mrs. Hughey Baker and Mrs. E. L. Goodwin. Other board members are Attorney Primus C. Wade, president; Roy Roller, secretary; the Rev. T. O. Chappelle, treasurer and representative of the Ministerial Alliance; Gordon Hicks, vice-president National Bank of Tulsa; R. W. White, president of Fuller-White Chevrolet Company; H. C. Whitlow, principal Booker T. Washington high school; Alex Phillips, and Dr. J. Houston Burt, Medical Association representative.

Negro named director of L. A. hospital

Tribune P. 3
Wed. 8-7-57
Los Angeles, Calif.

A first for a Negro in the state of California, and the West as well, Dr. E. Alfred Anderson, young Negro specialist in internal medicine, has been appointed medical director of John Wesley County hospital, at 28th and Hope streets.

Dr. Anderson received the appointment on the basis of his service at Los Angeles County General hospital where he received his training as a specialist in internal medicine. Especially interested in diseases of the heart, endocrinology, and sickle cell anemia, he has published many papers on the subject.

Dr. Anderson is also an instructor in medicine at the College of Medical Evangelists. During the past year, a research grant from the National Institute of Health at Washington enabled him to do research full time at White Memorial and the General hospitals.

Reared in his native North Carolina, he is a product of Meharry Medical School, Nashville, Tenn. He is married and the father of two sons.

19d 1957

COLORADO

Girl, Helpless Cripple, Restored To Health At Denver Jewish Hospital

Call Fri. 2-15-57 P.1

Kansas City, Mo.

DENVER.— Peggy Ann Cannon, 8-year-old tuberculosis meningitis victim, came to the National Jewish hospital by an Air Force mercy flight four months ago as a listless stretcher case.

Today she is one of the liveliest children in the hospital.

Peggy was flown here from Anderson Memorial hospital at Anderson, S. C. One of 14 children of Mr. and Mrs. Percy Cannon of Clemson, S. C., she had been stricken in August. In a month the disease had made her a helpless cripple. When admitted to National Jewish hospital at Denver Sept. 1, she seemed barely alive.

Tuberculosis meningitis is a form of tuberculosis that affects the covering of the brain and the spinal column. Until a few years ago it was always fatal. As a result of research at National Hospital at Denver and other hospitals, many of the victims can now be saved.

Within two weeks the famed free medical center, which accepts tuberculosis and chest disease patients without regard to race, creed or color, had Peggy sitting up in a chair. Even then she wouldn't speak to nurses. For days she sat by the door to her room, watching silently, frightened. Every day nurses came to visit and chat, but Peggy didn't answer.

To Mrs. Susan Ray, play supervisor, Peggy showed her first response. "Will you come back again?" she asked hesitantly one day.

From then on Peggy gained quickly. On Oct. 9 she limped to the children's dining room for the first time. A few weeks later she was able to begin classes in National Jewish Hospital's one-room school, which is part of the Denver public school system.

School friends and the affection of the nursing staff had an effect on Peggy as evident as that of the chemotherapy (drug treatment) for which National Jewish Hospital is internationally famed. Instead of being listless, Peggy was radiant. The practice of having birthday parties for patients excited her. She began planning for her eighth birthday—Dec. 8—chatted about it daily.

On Dec. 8, the party came off bigger than expected. The nursing staff, won over by Peggy's charm, chipped in for presents. Her mother sent her a box with a new pleated skirt, socks, a comb, toothbrush, and candy. Birthday talk was Peggy's favorite subject after that.

Peggy's limp is only slight now. She is undergoing physical therapy treatment and shows good progress. She can ride a bike, play ping pong, and romps with two other children — many of whom were flown in by the Air Force as she was—more dead than alive.

Peggy's case has cost more than $3,600 and she won't be released for another two months at least. For 58 years the hospital has operated by the motto: "None May Enter Who Can Pay . . . None Can Pay Who Enter."

Another rule of the hospital is that room always can be found for a child patient in an emergency. In Peggy's case the pediatrics department was full. But when she arrived there was a bed waiting.

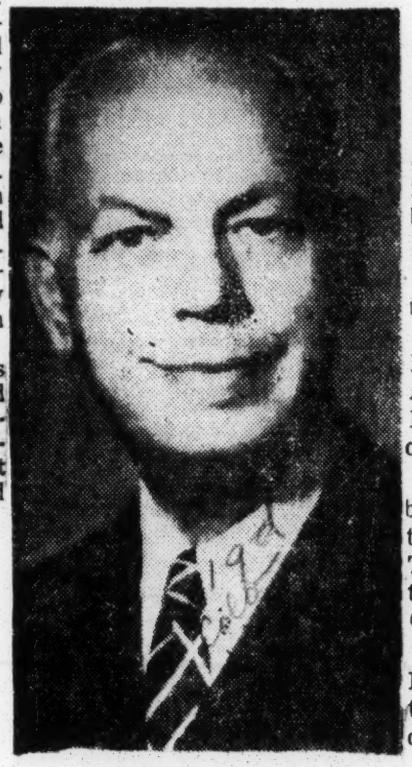
Jewish Hospital Picks Van Cleef

Defender Chicago, Ill.

Sat. 2-16-57

Felix Van Cleef, 1765 E. 55th st., management consultant, has been elected a vice-president of the National Jewish Hospital at Denver.

He was also re-elected to the board of trustees at the hospital's annual election, held in Denver,



FELIX VAN CLEEF

January 23. Van Cleef is chairman of the Hospital's Midwest regional committee.

In accepting the honor, Van Cleef commented on the urgent need of continued support of this famous free and non-sectarian medical center for tuberculosis and chest diseases which has given 205,352 days of free care to residents of Chicago since its opening in 1899.

"New cases of tuberculosis in the United States are occurring at the rate of 100,000 a year," he said. "And 96 per cent of those victims cannot pay for their care.

At National Jewish Hospital at Denver, where the care is free, recoveries are being achieved in 92 per cent of the cases.

"And this has been done in the face of a great increase in the number of advanced cases during the past year.

"But the research seeking a cure for this ancient disease goes on tirelessly. We know the dangers of complacency."

Also elected to the board of trustees was Sam Poncher, president of the Newark Electric Company, 223 West Madison, national distributor of radio and electronic equipment.

Re-elected as vice presidents of the hospital were:

Philip M. Klutznick of Park Forest, chairman of the board of American Community Builders, Inc., and international president of B'nai B'rith.

Melvin L. Straus, a board member and retired vice-president of the American National Bank and Trust Co. Straus is treasurer of the Hospital's Midwest Regional Committee.

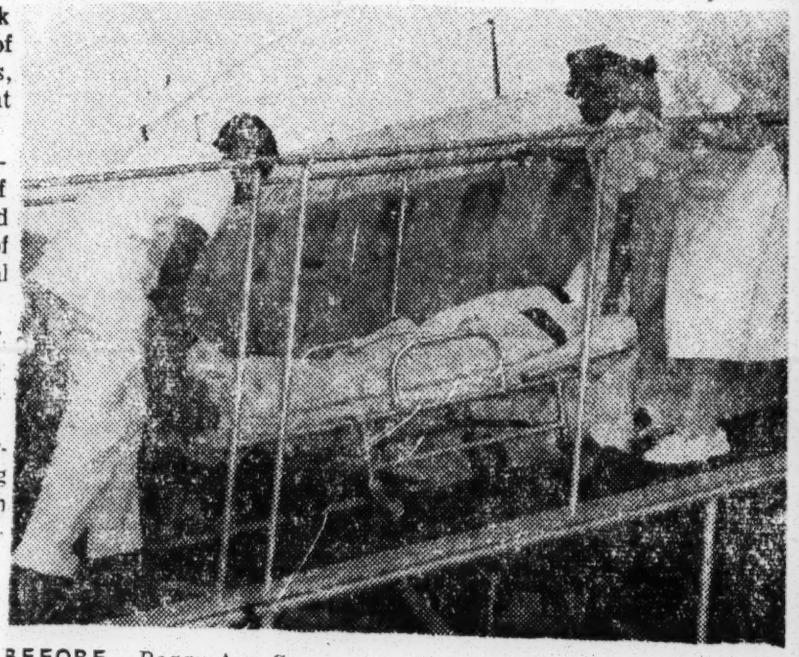
Isadore Samuels of Denver President of the Board of Education of that city, was elected president of the hospital.

Midwest headquarters for arranging admissions and accepting contributions are at 100 North LaSalle st. Leon W. Levy is Midwest regional director.



Call P.1
Fri. 2-15-57
Kansas City, Mo.

AFTER.—Today Peggy Cannon, 8, is the liveliest child in the internationally famed medical center where victims of tuberculosis and chest diseases are admitted without regard to race, creed, or national origin. It is expected that she will leave the hospital within two months.



BEFORE.—Peggy Ann Cannon, 8, of Clemson, S. C., was too sick to move or talk when she arrived on an Air Force mercy flight for treatment at National Jewish Hospital at Denver last September 1. Suffering from tuberculous meningitis, Peggy has made a remarkable recovery, doctors at the famed, free, non-sectarian medical center said.

19d 1957

D.C.

D. C. Dentist To Admit Negroes

Daily World
Atlanta, Ga.
1-17-57

WASHINGTON — (ANP) — The District of Columbia Society has voted to admit Negro dentists to its membership.

The vote to change its former policy for all-white members was taken by a secret mail ballot. But the actual vote count had not been made public at press time.

The question of lowering the bars against Negro members was raised after Dr. John A. Turner, chief of oral surgery at Howard University School of Dentistry had filed an application for membership.

Turner said membership in the local society would make him eligible for membership in the American Dental Association which has no racial bars.

Over $4,000,000 Budget Asked For By Hosp. Officials

World p. 3
Wed 1-23-57
Baltimore, Md.

WASHINGTON D. C. (ANNPA — The budget for Freedom's Hospital for the fiscal year beginning next July 1, submitted Wednesday to Congress by President Eisenhower, totals $4,153,000, an increase of $358,000 over the 1957 budget.

Of the total estimates, Congress is expected to make direct appropriations of $3,032,000 for salaries and expenses of the hospital. This sum is $277,000 more than Congress appropriated for the current fiscal year.

The $2,755,000 appropriated for the current fiscal year reflected a decrease of $226,000 in 1956 appropriations and an increase in estimated reimbursements from non-Federal sources of $25,000. This left a net decrease in estimates for the current fiscal year of $201,000, which the hospital said was due primarily to a reduced patient load in the tuberculosis hospital.

The hospital is financed by direct Federal appropriation and income from pay patients, the District of Columbia, and nearby counties in Maryland and Virginia.

In fiscal year 1958 the hospital expects income from pay patients to increase from an estimated $710,000 in the current fiscal year to $791,000, income from the District of Columbia for indigent patients to remain at $300,000, and income from nearby Maryland and Virginia counties for indigent patients to continue at $30,000.

While expecting its total estimated income to climb from an estimated $1,040,000 in the current fiscal year to $1,121,000 in the next fiscal year, the hospital expects its patient load to drop from 348 to 335.

The reduced patient load is expected to be among adults in the general hospital. Newborn babies and patients in the tuberculosis hospital are expected to continue at the same figures of 33 and 52, respectively.

3 Institutions Escape Ax of Budgeteers

Freedmen's Hospital, Howard U., Gallaudet Requests Approved

Three Washington institutions escaped the budget cutting epidemic yesterday as the House continued action on the Health, Education and Welfare Department's $2.5 billion budget request for ntxt year.

Tentatively approved without opposition were budgets for Freedmen's Hospital ($3 million); Howard University ($4,212,000); and Gallaudet College for deaf students ($2,420,000). The action can be reversed only by a roll call vote later.

Up to that point the Republican - Southern Democratic coalition had tried to cut virtually every item in the bill and had succeeded in most.

But the economy bloc was defeated on yesterday's only vote when it tried to cut $2 million from $5 million in grants to expand rural library service. The House then quit for the weekend and will start its fth day of voting on the bill Monday. An attempt is expected then to cut school aid to areas like suburban Washington counties which are heavily populated by Federal employes.



FORMER INTERNES and residents of Freedmen's hospital in Washington, D. C., have completed plans for the 35th annual meeting of the Association of Former Internes and Residents of Freedmen's hospital which will meet in Washington June 4-6. Shown above during the planning committee meeting are, Front row, left to right: Dr. Clarence S. Greene, chairman of program; Dr. James E. Walker, executive secretary; Dr. Robert S. Jason, president and Dean of the Howard University School of Medicine; Dr. James E. Roberts, treasurer; 2nd row, left to right: Dr. Edward W. Hawthorne, secretary; Dr. J. Harold Nickens, chairman of entertainment; 3rd row, left to right; Dr. George L. Johnson, chairman of publicity; Dr. Calvin B. LeCompte, chairman of exhibits; and Dr. A. Hugh Simmons, chairman of hospital, all of Washington, D. C.

Ex-Freedmen Medics To Meet June 4

Defender p. 5
Sat. 5-4-57
Chicago, Ill.

WASHINGTON — The 35th annual meeting of the Association for Former Internes and Residents of Freedmen's hospital is expected to attract more than 300 physicians from 20 states here June 4-6.

The event will feature scientific meetings and exhibits which will be held in the auditorium of the Biology building of Howard university.

Heading the program committee is Dr. Clarence S. Greene. Assisting him are Drs. Mitchell W. Spellman, W. Lester Henry, Coleridge M. Gill and Albert R. Hughes.

More than 1000 physicians have received their hospital training at Freedmen's hospital during the past 63 years. They now are practicing in some 30 states and many foreign countries.

During 1956-57, 64 physicians and two dentists have been undergoing hospital training at the institution as follows: four medical externes; 18 medical internes; two dental internes; two chief residents in general surgery; one resident in orthopedic surgery; one resident in eye, ear, nose and throat surgery; one resident in thoracic surgery; one assistant resident in orthopedic surgery; one assistant resident in eye, ear, nose and throat surgery; two assistant residents in urology; six assistant residents in general surgery; one resident in obstetrics and gynecology; five assistant residents in obstetrics and gynecology; one resident in pediatrics; four assistant residents in pediatrics; one resident in internal medicine; one resident in neurosychiatry; two assistant residents in radiology; one assistant resident in dermatology; one assistant resident in neuropsychiatry; one assistant resident in tuberculosis; and nine assistant residents in internal medicine.

Three Institutions Told District Can't Pay for Any New Indigent Patients

By Harry Gabbett
Staff Reporter

Health Director Daniel L. Finucane has notifed three private hospitals here that the city cannot pay them for the care of new indigent out-patients beginning May 1.

In similar letters addressed to Emergency, Georgetown and Garfield Hospitals, Finucane said he was taking the unprecendented step with "very much regret," but he deemed it "necessary in order to stay within the medical charities appropriation for fiscal 1957."

The three institutions are among eight Washington hospitals with which the city contracts annually for indigent out-patient care at the rate of $2.40 per patient per visit. Actual cost to the hospitals, a spokesman said, averages $6 per patient.

First Action in 10 Years

Indigent out-patient loads at the five other hospitals—Casualty, Episcopal Eye, Ear & Throat, George Washington, Children's and Providence—have not yet reached the point where restriction of admissions is necessary, recipients of the April 16 letters assumed.

William M. Bucher, executive director of the Hospital Council of the National Capital Area, said Finucane's action was the first such in the 10-year history of the program.

In at least three previous years, the city had certified payments beyond the funds contained in the appropriation, depending on deficiency appropriations out of which the over-certifications were paid, Bucher said.

This happened in fiscal 1951, 1954 and 1955, Bucher said, in amounts totaling more than $185,000 for the three years.

Staying Within Law

Dr. Finucane was not available for comment on his action but a spokesman explained that it was a simple case of staying within the law prohibiting over-expenditures of appropriations. The medical charities allotment for this year was $1,045,000.

"Because the requirement has not been met in the past seems insufficient justification for not meeting it now," the spokesman explained.

Mrs. Neville Miller, president of the Visiting Nurse Association which refers a majority of the patients to the hospitals affected, termed the "reduction in the medical care available to families already in distress . . . deplorable."

She said it meant that most of the new patients the Association ordinarily would refer to one of the three institutions must now be sent to D. C. General Hospital where out-patient overcrowding already is a serious problem.

Hardships Cited

In addition to the prospect that D. C. General facilities may not be able to cope with the new load, Mrs. Miller explained, a hardship will be worked on those who must travel great distances to reach the municipal hospital.

Bucher said Finucane's action left the three hospitals with only two courses open. They can refer the new patients to D. C. General or absorb the entire cost of treatment themselves.

Finucane's letter defined a "new" patient as one whose name has not appeared on the hospital's clinic bill, or been approved for payment, subsequent to July 1, 1956.

Bucher estimated that about one-third of the 9000 clinic visits recorded by the three hospitals during the first quarter of this year would be classified as "new" patients under terms of Finucane's order.

Freedmen's Hospital asking additional $60,200 for 1957

WASHINGTON (NNPA) — Freedmen's Hospital made a request for an additional appropriation of $60,200 for the current fiscal year during hearings on the third supplemental appropriation bill, made public Tuesday.

Dr. Charles E. Burbridge, Freedmen's superintendent, testified that the additional appropriation would be used to provide 23 additional nurses, $13,800; for repairs and renovations to two elevators, $20,000, and the purchase of a fluorosecopic radiograph unit.

The request for 23 additional nurses, he said, is being made to relieve a critical staffing situation in the general hospital.

He said the hospital was attempting to operate through the current fiscal year with its present staff, but several outbreaks of diarrhea in the newborn nurseries and other problems made the request necessary.

* * *

A RECENT fire in the controls of one of the elevators in the tuberculosis annex caused a survey to be made of this equipment by the public Health Service and Public Buildings Administration.

It was recommended that all controls and faulty wiring be replaced in the elevators to prevent another fire.

Dr. Burbridge said the flouroscopic X-ray uit in the general hospital is obsolete, in need of constant repair, and presents a hazard from radiation and shock to both patients and personnel using this equipment.

The flouroscopic using this equipment.

The fluoroscopic X-ray unit, he added, "is beyond the point of economical repair and should be retired from use."

* * *

DR. PAUL B. CORNELY, medical officer at the hospital, explained that excessive radiation from the X-ray unit may cause "destruction of the blood cells, sterility, burns, and other abnormalities."

He added that it is not possible to get good diagnostic pictures consistently and it is necessary "to repeat the procedures to get good diagnostic results.

* * *

REP. JOHN E. FOGARTY of Rhode Island, chairman of the Labor and Health, Education and Welfare Departments appropriation subcommittee, said he was in sympathy with the request but it seemed most unusual that the items asked for were not included in the regular 1957 budget.

He pointed out that there are no new laws for the hospital to administer and no increase in the patient load — "nothing to indicate you need more employees than when your 1957 budget was sent to us."

D C Hospital Gets $46,000 Appropriation

WASHINGTON, D C (NNPA) — The House Appropriations Committee has recommended a supplemental appropriation of $46,400 for the current fiscal year for Freedmen's Hospital.

This sum, carried in the third supplemental appropriation bill for 1957, represents a cut of $13,800 from the amount the hospital requested. The committee rejected a request for that amount for 23 additional nurses.

"The Congress appropriated every dollar that was requested in the regular budget for 1957," the committee report stated. "There has been no increase in load since the 1957 budget was presented to Congress. The committee, therefore, disallowed this item.

"If there is merit in the request it certainly should have been included in the regular annual budget for 1957."

The committee allowed an item of $20,000 for elevator repairs. The report pointed out that a fire had occurred in one elevator last November which called attention to the need for elevator repairs.

Doctor says 'I just can't serve colored people'

WASHINGTON

"I didn't refuse any kind of treatment to him. I just can't serve any kind of colored people in my office."

The speaker was Dr. A. E. Rundi, with offices at 5120 MacArthur Blvd., NW, in answer to charges that he refused to give emergency treatment to a 13-year-old boy who fell and cut his leg on a rock while on a school hike.

"Do I have to answer questions about myself? If so, I suggest that you come to my office," the physician said Tuesday over the phone with finality.

THE BOY is William Beccles, 311 Webster St., NW, seventh grader at MacFarland Junior High School. He fell Friday near the Dalecraia Reservoir along the Potomac River, while he and a group of pupils were searching for marine specimen.

The gash in young Beccles' left leg required five stitches at Georgetown Hospital, where he was finally taken by Jack H. Gatsinos, MacFarland teacher in charge of the group.

"He was bleeding very badly," Mr. Gatsinos recalled. "I didn't have any way of treating the wound, except by covering it with bandage and gauze.

"I carried him a good mile," he added. "We went into the doctor's office. He looked at the boy and said, 'Is this the patient? I don't handle colored patients.'"

* * *

MR. GATSINOS said the doctor then suggested that he take young Beccles "to Georgetown Hospital about three miles away."

"He hasn't been to school this week," said the boy's mother, Mrs. Margaret Beccles, medical technician. "He's recovering all right. I carried him to Walter Reed for a tetanus shot.

"It could have been something that might have given the kid the lockjaw and he might have passed away," she added.

"I'm going to speak to the doctor about refusing service to my son, not for his sake, but for the sake of some other mother's child."

Mental Patients Enjoy Recreation at Hospital

Times-Picayune P. 24
Sun. 6-16-57
New Orleans La.

Reporter Reveals Actions at Social Gathering

By SAUL PETT

POUGHKEEPSIE, N. Y., June 15 (AP) — There were some who looked it and some who didn't.

There was the stately woman with the striking white hair and a cashmere sweater draped gracefully around her shoulders. She looked like a suburban matron you might meet at a PTA meeting.

There was the boy with the crew cut and the white buckskin shoes, and he looked like almost any boy you might meet on a college campus.

But there were also the bizzare ones — the faces with a glazed, walled-off look that appeared impenetrable and the faces with a cloudy troubled look that suggested a deep, inner rain they were hiding. There was the girl whose eyeballs rolled way up and back in their sockets. There was the woman with stringy gray hair, whose face and body looked as limp as the overlaundered institutional dress she wore.

All Mental Patients

All of them were mental patients. And this was a recreational evening in one of the buildings at the Hudson River State Hospital. We were in a basement room — bare gray walls, an old standup piano in the corner and windows with gay, colorful curtains that couldn't quite hide the protective screening.

Mostly, they sat at card tables and played bingo. Now and then they stopped for singing and dancing. At one such break, the limp woman with the stringy gray hair whom we'll call Helen asked if she could sing.

She sang "Casey Jones," boldly but badly. Several times she stopped herself, looked blankly at her audience, smiled shyly, said "Scuse me," and then continued.

'Strongly Delusional'

("Helen," the psychiatrist explained later, "is strongly delusional. She thinks she's a glamorous movie singer. And when she stops herself in a song, she thinks she hears the director saying, 'Cut' or 'Hold it' or something like that.")

The college boy named Walter and the white - haired woman named Elvira danced together.

They danced sedately, far apart, and she talked continuously while he nodded mechanically. She, looking old enough to be his mother, appeared casual and completely outgoing. He was stiff, polite, constrained. He wore no belt because a belt in his hands might be dangerous.

(Walter, the psychiatrist said, is 19, intelligent, sensitive. He was a sophomore in college until a few months ago when he slashed his wrists. It began with an unhappy love affair and he couldn't cope with the disappointment.

'Couldn't Handle It'

("I suspect," said the doctor, "his parents were overly strict, did his planning and thinking for him. Now, when a big life problem came along, he couldn't handle it alone. But we are working intensively with him. I think we can return him to society a useful person.")

The patients returned to the card tables and the bingo game resumed. Mrs. Edna Dyckman, a pleasant, middle - aged "Gray Lady," called out the numbers, assisted by a second "Gray Lady," Mrs. Marion Meyn. They are Red Cross volunteers who come to the hospital one night a week to help entertain the patients, one of many organizations which participate in the hospital's volunteer program.

Mrs. Dyckman occasionally made small jokes as she called out the numbers.

"0-21," she said. "Just my age."

Slight titter from the patients. One, a tall, thin girl with severely straight hair and heavy eyelids, said, almost bitterly, "I'll bet." Call her Evelyn. She is 20. She is a mental defective.

'Sweet Sixteen'

"I—16," said Mrs. Dyckman.

"Sweet sixteen," said a man in a bright red sports shirt, whose brain has been damaged by syphillis.

As she eyed her bingo board, Evelyn seemed accidentally to brush her leg against the knee of the college boy Walter. He shifted in his chair. She leaned to one side and their shoulders touched. He moved away again. In their wards, the patients are separated by sex. Only on recreational evenings do they mix.

"Bingo!" yelled, Sandra from the back of the room. She walked up to claim her prize, a pack of cigarettes. Sandra, who is 19 and has been in the hospital seven years, is a short, stubby girl with a pimply face. She wore a dark jacket with Elvis Presley's name on the front and several of his hit song titles on the back.

As she walked up, her eye balls rolled back in their sockets, almost out of sight.

'Lives in Fantasy'

(Psychiatrist: "Sandra, too, lives almost entirely in fantasy. She imagines she's a beautiful, glamorous dancer who is in love with Elvis Presley.

("She can control her eyes. When she wants something, in the world of reality, her eyes appear normal. When she slips into her fantasy world, her eye balls roll up and back, as though searching deeper into her imagined world.")

"I'd like to win a cigar," said a barrel-chested, friendly man seated in a rocker against the wall. He wasn't playing.

"Well, why don't you play?" asked Mrs. Dyckman.

"I get too mad when I lose," he said. "But I'd like a cigar for my birthday. Next Friday I'm 66. I was born in 1891, next Friday. I always like a good cigar on my birthday."

Must Be Watched

Mrs. Dyckman handed him a cigar, he thanked her, returned to his rocker and grinned contentedly.

He had spoken pleasantly, not belligerently. It was a sudden public speech but few of the other patients bothered to look up, possibly because they are accustomed to sudden public speeches.

The next bingo winner was Tony, a tall, dark man, with huge powerful shoulders but a soft-looking, innocent face. As he walked up for his prize, an attendant told me that Tony still has to be watched closely; that in his early days in the hospital he tried several times to attack attendants. Tranquilizer drugs, however, have since made the difference; he is now controllable.

Brain Deteriorated

("Tony's brain has deteriorated," the psychiactrist said. "He's no longer destructive, but you couldn't put him out in the community on his own. Unless, perhaps, he could get some small job on a farm, where he was under supervision, where he was told what to do, then he might adjust. "It's like a damaged tire. Some you can fix. But when it's cut all the way through, there's nothing you can do. Maybe in the future, maybe someday another new drug or another development in brain surgery might come along. Maybe that could help Tony.")

The bingo stopped and the singing resumed. A tall Negro woman with a gay look in her eyes and a long cigarette holder played the piano. She has been in the hospital 13 years, I was told, but only in the last two has she shown improvement. Her daughter and granddaughter have started visiting her again, about twice a year. She no longer sees her husband. They're separated.

She played and they sang "Irish Eyes" and "Let Me Call You Sweetheart" and other sentimental songs. Watching the patients' faces, I could not detect any note of nostalgia, any suggestion of regret or longing for their own homes. But nurses told me that, among themselves in their own wards, patients mostly discuss the prospect of going home soon, even when the prospect is not good.

"How about 'Home on the Range?'" one patient suggested.

"Which range?" asked another patient, and many laughed.

There was a pause for doughnuts and milk. Two young men stood near the piano. One, a tall, handsome patient in his early 30s, talked with me. He said he had been in the hospital only three months, that he had come from a good office job, that he had a wife and two wonderful children. Call him Bob.

Needs Confidence

"All I need," he said, a look of quiet pain in his eyes, "is confidence. Once I get my confidence, I'll be able to leave here."

(Bob is improving, the doctor said, and might be going home in a few months.)

The second man at the piano said he was now all better, that he was getting out in a few days, as soon as his wife called for him. Call him Harry. He was quiet, handsome and had big tattoo decorations on his lower arm.

Harry moved over to the piano and tried a few sad chords tentatively with his left hand. I asked him to play. He said he's rather not. I asked him about his job. He said he was a fighter. He said he had had 16 fights, was doing pretty well, even fought on television twice before he became

Just Answered

He named some of his opponents and they included well-known fighters. He didn't volunteer the information but seemed only to be answering my questions, not at all bragging.

("It's true," said the psychiatrist, "Harry is getting out in a few days. He has a wife and three children. They married very young. He tried, unsuccessfully, to make a living entirely as a fighter. That added to his tension. Also, he worried about his wife. He became unreasonably jealous. He tried to frighten her, he tried to compensate for his frustrations and suppressed rage in a number of ways. One was an attempt to kill himself. But that, I believe, is behind him. Harry is much better now and should be able to get along.")

Later I looked up Harry in the boxing record books but I couldn't find his name anywhere. That doesn't mean he wasn't a fighter at all. It does mean he hadn't done as well as he said he had. I wish I had never looked it up.

Regional Mental Health Council Meets In Louisville

Courier Journal
Atlanta Ga.
Fri. 6-28-57

LOUISVILLE, Ky. — The Southern Regional Council on Mental Health Training and Research will meet in Louisville, Ky., June 28-29 to consider several proposed projects and elect officers for the coming year.

The Council was established by the Southern Governors Conference of 1954 after a year-long regional study by the Southern Regional Education Board of the problem states face in dealing with mental illness and health. The Council consists of one member from each of the 16 participating states appointed by his governor plus eight members appointed by the SREB.

The purpose of the Council is to aid states in dealing with several major problems outlined in the report of the region-wide study. These major problems are that mental disorders are a growing burden on the states, that the states must have more trained personnel in mental health programs, and that the states need new knowledge in mental health and illness.

Projects that the Council will consider at its Louisville meeting include: a proposed experiment in the educatoin of the mentally retarded; exchanges of personnel among mental hospitals for in-ser-

Virginia Briefs

Post + Times Herald
Washington D.C.
P. 10-L

Mental Hospital Doctor Checks Brutality Report

PETERSBURG, Va., June 26 (AP)—Dr. Romulo F. Gonzales, physician in charge at Petersburg Training School and Hospital, said today he is investigating reports of attendants beating patients at the institution.

Dr. Hiram W. Davis, Mental Hygiene Commissioner, said Gonzales was making "his own personal investigation" and a report is expected within a few days.

The investigation was spurred last week when Colonial Heights Police Sgt. R. J. Fontaine picked up a 13-year-old youth who had escaped from the mental institution for Negro youths. The boy had visible marks on his body which, Fontaine said, he claimed came from belt whippings.

Gonzales said an attendant employed at the institution since 1941, E. M. Morgan, had admitted beating a boy on June 14 because he had run away.

Gonzales said sometimes the youths make up stories of beatings in order to retaliate against the attendants' discipline.

Most of These Dancers Are Mental Patients



—Photo by AP Newsfeatures.

RECREATIONAL INTERLUDE AT HUDSON RIVER STATE HOSPITAL
Community volunteers dance, chat with institution's residents.

vice education and a study on the economic value to states of providing adequate mental care.

Dean Whitney Young, Jr., of the Atlanta University School of Social Work, is a member of the Council.

Mental Health Booklet Will Be Widely Read

It may never be a best seller, but "Mental Illness: A Guide to the Family" will no doubt become one of the best read booklets ever published.

Already, the Alabama Association for Mental Health, cooperating with the State's mental hospitals, is sending out from 15 to 25 copies a week of Author Edith Stern's practical guidebook on mental illness.

The booklets are being sent to those who have requested them because of mental illness in the family. Free distribution of the publication is made possible through voluntary contributions to the work of local and state mental health associations and the National Association for Mental Health.

The guidebook deals with the problems and tensions arising when mental illness strikes. The author, in explaining how she happened to write the book says:

"There were books about how to run a household and how to bring up dogs, but there was no book telling people how to behave and what to do when one of their dear ones falls mentally ill. This guidebook for relatives I hoped would fill that need."

Miss Stern relates that there is much unnecessary suffering for both relatives and patients when mental illness strikes in any form because most people are so unprepared and bewildered. She says the most important thing for the patient's chances of recovery and for the relative's peace of mind is to realize that mental illnesses are like any other illnesses.

Once you have accepted the essentially simple fact that you are dealing with someone who is sick, says Miss Stern, you will stop being exasperated and anguished by his seemingly unreasonable actions.

She notes, too, that relatives will spare themselves much self-torture and help speed their loved one along the road to mental health if they realize that no more stigma should be attached to a disordered mind than to disordered circulation.

Additional information on the booklet may be obtained by writing the Alabama Association for Mental Health, P. O. Box 3283, Birmingham.

This material and others dealing with down-to-earth, practical facts are contained in the 95-page guidebook. There is even a section devoted to the terms relatives may hear used in connection with the patient or the hospital.

6000 Cases Of Mental Illness May Face Review

Post & Times Herald Sat. 3-2-57 Washington, D.C.

Ruling by Court On St. Elizabeths Inmate's Petition Stirs D. C. Furor

By Morrey Dunie
Staff Reporter

A new appellate court decision directing that persons committed to St. Elizabeths Hospital be represented by attorneys may lead to a wholesale review of the commitments of almost 6000 inmates.

This was the fear voiced by United States Attorney Oliver Gasch yesterday, a day after the United States Court of Appeals ruled that an "alleged insane person has the right to be represented by counsel, and if not so represented independently then the court shall appoint either an attorney or a guardian . . ."

The decision was in the case of Genevieve R. Dooling, who was decreed to be of unsound mind in September, 1954. She was committed to St. Elizabeths and in February, 1956, filed a petition for a writ of habeas corpus.

Basis of Complaint

She contended she had not been represented by counsel at the commitment proceedings, although she did have a court-appointed lawyer who was discharged at her request.

The petition for a writ of habeas corpus was denied, and the appellate tribunal reversed this ruling. Judges Charles Fahy, John A. Danaher and Warren E. Burger ordered that new proceedings be initiated within five days after the case returns to District Court, or else the woman be released.

Acting on the basis of the Dooling decision, District Court Judge Matthew F. McGuire refused yesterday to sign 14 commitment orders submitted by the court's Mental Health Commission.

The person involved had not been represented by counsel at the Mental Health Commission hearings.

Authorities Confer

Gasch met yesterday with Assistant Corporation Counsel Una Rita Morris, Mental Health Commissioner Thomas Gillespie Walsh and Hugh J. McGee, chairman of the District Bar Association's Mental Health Committee; to discuss the Dooling case.

No decision was reached on what steps will be taken. But Gasch said that under consideration is a request that the full nine-judge bench of the Appellate Court rehear the Dooling case.

Gasch, whose office represents St. Elizabeths in all habeas corpus proceedings pointed out there is nothing in the decision that makes it apply only to future cases.

If the decision that counsel must represent all persons alledly of unsound mind is retroactive, Gasch indicated, St. Elizabeths inmates might flood District Court with petitions for habeas corpus writs.

Although Walsh refused to discuss the Dooling decision, Gasch said the Mental Health Commissioner reported there are 40 to 50 mental health cases in the court each week.

Of the people examined at District General Hospital for possible future commitment to St. Elizabeths, Gasch said only 1 per ment asks for jury trials to determine their mental condition.

Post & Times Herald

Lawyers Appointed

In these cases the judges appoint lawyers to represent the individuals. The overwhelming majority—99 per cent—of the persons committed are sent there on the basis of Mental Health Commission orders.

These orders are submitted to the court after Mental Health Commission hearings at District General Hospital, where psychiatrists and non-medical persons are heard.

McGee said the tendency in the past has been to make the Mental Health Commission hearings as informal as practicable to avoid possible harm to those involved.

Formality Feared

He suggested the forced use of counsel would increase the formality of the hearings to the detriment of mentally ill persons. In the past there have been attorneys at the hearings when requested by the persons involved, Gasch said.

The prosecutor reported it would appear that the Corporation Counsel's office must be represented at hearings in the future, if the allegedly mentally ill are represented by lawyers.

Another problem which might arise is a shortage of lawyers to appoint to represent the parties at Mental Health Commission hearings. Such attorneys, when now appointed at the request of the individuals, are paid $25, and Gasch said Walsh fears his office might run out of funds.

Dr. Winfred overholser, superintendent of St. Elizabeths said he has not yet studied the Dooling decision. He said there are nearly 6000 inmates in his institution who were committed on eMntal Health Commission orders.

Name Three For University Meet

TALLAHASSEE, Fla. — Three more persons have been named as consultants for the 28th annual meeting of the Florida A and M university Clinical Association, which will convene Feb. 12-14.

They are Raymond Lewis Hayes, D. D. S., professor and head, department of oral medicine, school of dentistry, Howard university, Washington, D. C.; John B. Johnson, M. D., head, department of medicine, Howard university, and Noah R. Calhoun, D. D. S., chief, dental service and oral surgeon, Veterans Administration hospital, Tuskegee Ala. Previously, it had been announced that Dr. Jack White, assistant professor of Surgery and director of the cancer teaching project at Howard, had accepted an invitation.

Negro Clinic Cash Sparse

Several South Dade physicians have "expressed interest" in a half-completed hospital which Negroes of the Goulds area started to build eight years ago but have been unable to complete because of lack of funds, Arthur W. Mayes, a Negro area leader, said Saturday.

Money contributions totaling only about $20 have been received since a story telling of the Negroes' attempt to help themselves appeared in The Herald March 11.

Mayes, whose address is Box 44, Naranja, Fla., said nevertheless "plans are moving ahead" for the hospital to be located at Hainlin Dr. (SW 216th St.) and South Allapattah Rd. (SW 112th Ave.)

"We need this hospital pretty badly out here for emergencies with a vegetable field worker population that goes to 30,000 in winter," Mayes said. "We're still trying to help ourselves get the hospital."

To Study Means of Integrating Nation's Hospitals

Daily Worker 3-21-57
Des Moines Iowa
Thurs. 3-21-57

Washington—Ways and means of achieving racial integration in hospitals will be explored at a national health conference here, March 8-9.

Co-sponsoring the conference are the NAACP, the National Medical Association, and the Medico-Chirurgical Society of the District of Columbia. Dr. W. Montague Cobb of this city will serve as chairman. Dr. Cobb is a member of the NAACP Board of Directors and chairman of the NAACP national health committee.

It is expected that among those attending the meeting will be representatives of all national organizations—private and governmental—directly or indirectly connected with hospital services, the National Medical Association, and NAACP branches.

In addition to devising an action program to bring about racial integration in hospitals, the conference also proposes to formulate a comprehensive statement of present hospital discrimination as it exists in all sections of the United States.

Hospital service startles many, would please few

Afro-American Sat. 3-23-57
Baltimore Md.

By CLARENCE MITCHELL

WASHINGTON

Urbane Dr. Montague Cobb, who often garnishes tough medical truths with philosophy and poetry, gathered his fellow medical men and interested laymen for an examination of American hospitals.

The result: public realization that institutions established to treat the ill are in an unhealthy state themselves.

* * *

IN TWO days of meetings at the 15th Street Presbyterian Church, hospital care and hospital services were subjected to an examination that would have startled many and pleased only a few.

One cause for eyebrow raising was a story from a North Carolina doctor who said that he sent a patient with a bone fracture to a local hospital in his state.

The patient was a child and presumably was in pain. Up to that time, the doctor had been permitted to use the hospital's facilities.

* * *

AFTER THE child arrived at the institution, the doctor received a telephone call saying that, because of a change in policy, he could not treat the patient there.

I had a fleeting picture of a child in pain, unable to get treatment because some sawdust heads decided "our policy will not permit a colored doctor to treat the sick in our hospital."

* * *

CAUSE FOR being pleased came, oddly enough, from Opelousas, La. Dr. A. C. Terrence told the listeners that the hospital in that community has abandoned segregation and has also accepted colored personnel on its staff.

A similar good report was given by a layman, Ishmael Johnson, about New Kensington, Pa. The hospital there has a complete pattern of integration.

* * *

FOR THE most part, hospitals seemed to be putting colored patients in segregated wards or basements if they are located in the South.

In the North, conditions range from general acceptance of colored patients on a non-segregated basis, to quota arrangements and complete exclusion.

A common denominator of the North and South is discrimination against colored doctors and nurses.

One doctor reported that a white colleague had offered to let him deliver a baby in a hospital on the condition that the medical report would be signed "baby delivered by Dr. X (who is white) per Dr. Y (who is colored)."

* * *

IT WAS GOOD to listen to my old schoolmate, Dr. Thomas C. McFall of Charleston. He spoke with clarity and cold facts about the pitfalls of the Hill-Burton Hospital Construction Act.

This federal legislation is another system of channeling funds into southern communities that use it for building new monuments to segregation.

Refreshing information on how hospitals operated by the United Mine Workers in West Virginia do not segregate was given by Dr. P. R. Higginbotham of Bluefield.

The meetings were under the auspices of the National Medical Association and the NAACP. As Dr. Cobb would say, "the gut is now clear and we may proceed with the operation to remove jim-crow."

Racial Integration In Hospitals To Be Sought In Bill Before Congress

Globe Fri. 3-22-57
Nashville Tenn.

WASHINGTON, A national conference on racial integration in hospitals, held here last week, voted unanimously to seek an amendment to the Hospital Survey and Construction Act of 1946, deleting provisions for racial separation.

The conference, described by its chairman, Dr. W. Montague Cobb of Washington, as the first of its kind, was sponsored jointly by the National Association for the Advancement of Colored People, the National Medical Association, and the Medico-Chirurgical Society of the District of Columbia.

Dr. Cobb is chairman of the NAACP National Health Committee as well as a member of the Association's Board of Directors.

Commenting on the conference proceedings, Dr. Cobb said. "A large amount of little-known information was secured, which laid the basis for a sound program for future constructive action." A second meeting is planned for next year, he noted.

In addition to specifically seeking an amendment to the Hospital Survey and Construction Act, the conference voted unanimously to work "continuously and vigorously, in a spirit of amity" until racial "discrimination has been eliminated from hospitals in the United States."

The delegates heard a proposal from Rep. Barratt O'Hara of Illinois that private voluntary hospitals which practice racial discrimination be deprived of their tax exemption status as a just penalty for such practices.

Globe P. 2

Other speakers at the conference included Congresswoman Florence P. Dwyer of New Jersey; Roy Wilkins, NAACP executive secretary; Dr. T. R. M. Howard, president of the National Medical Association; Dr. Edward C. Mazique, pesident, Medico-Chirugical Society; and Dr. Robert S. Jason, dean, Howard University College of Medicine.

Conference sessions dealt with the incompatibility of racial discrimination with good hospital policy, the necessity of free access to hospital facilities in order for physicians to render maximum service, and conditions in loca hospitals including those built with federal funds appropriated under the Hill-Burton Act.

Nearly 200 delegates from 21 states attended the conference which was held March 8 and 9. They represented the NAACP, the National Medical Association, the National Urban League, and various medical and hospital societies.

The meeting was designated the Imhotep National Conference on Hospital Integration. Imhotep was an Egyptian physician, architect, priest and scholar, who lived about 3000 B. C.

RACE HELD NO BAR TO MENTAL HEALTH

Thurs., 9-5-57

Ghana Psychiatrist Reports Africans No More Weak Than European Whites

New York

Special to The New York Times.

ZURICH, Switzerland, Sept. 4 —In the measured sentences of science an African psychiatrist declared today his faith in the equality of man.

The speaker, Dr. Edward F. O. Forster of Ghana, told an international congress of psychiatrists that the African was often considered to be "a peculiar creature whose reactions cannot be viewed in the same manner as those of persons in other parts of the world, especially the Western world."

Some medical researchers feel "the mentality of the African must be basically different from that of the European," Dr. Forster said.

"I do not believe this is so. I maintain that we are all endowed with basically similar mental attributes to make us all rational human beings," he said. Dr. Forster is on the staff of the Ghana Mental Hospital in Accra.

"Some have asserted that the African is an inferior being as compared with the white races and have attempted to justify their assertions by devious calculations from some anatomical measurements, particularly of the skull," he said.

Reports on Survey

"Some assert that the African is fundamentally different in his mentality from the Westerner and that his psychological reactions must of necessity be different," he added.

Studies conducted among the 1,300 patients at the Ghana Mental Hospital at Accra show the contrary to be true, Dr. Foster reported, saying: "The psychological reactions of our patients differ in no way from the reactions of similar groups of patients seen elsewhere in the world."

He was addressing the Second International Congress for Psychiatry. More than 2,000 psychiatrists and other physicians from fifty-seven nations are here for the meeting devoted primarily to schizophrenia.

Schizophrenia, regarded as the most serious and difficult to treat of all mental diseases, is most prevalent in Ghana in the southern areas, Dr. Forster said. The area contains most of the nation's educated or semi-educated people "who practice the Western way of life," he noted. "These are the people who are torn between their old cultural heritage and newly acquired Western culture."

Witchcraft Influence Cited

Dr. Forster said heredity and environment had exerted a "modifying influence" on symptoms found in Ghana's mental patients. He described the most important environmental factors as "superstitious beliefs in the influence of the juju, the fetish and witchcraft."

Another African psychiatrist, Dr. T. Adeoye Lambo of Abeokuta, Nigeria, said that studies of the mentally ill in his country would not have been possible without the "close collaboration" of "native medicine men who are usually in charge of these rural patients."

Most of the 700 papers to be presented at the congress concern schizophrenia, its diagnosis and treatment. A psychiatrist from Thailand said that Buddhaism, a religion "teaches us to be content and live in a submissive way of life" might be a cause of schizophrenia in his country.

A Buddhist Himself

The Thai, a Buddhist, was Dr. Prasop Ratanakorn, director of the Prasat Hospital for Neurological Disorders in Bangkok. He said the teachings of Budha "may give rise to a lack of eagerness and the turning away from reality."

At another session, Dr. Karl Menninger, noted American psychiatrist, admonished those of his colleagues who might be preoccupied with classifying instead of curing mental disease.

Dr. Menninger, director of the foundation in Topeka, Kan., that bears his name, said hundreds of psychiatrists he knew were handicapped because they considered a patient as someone "afflicted with a certain disease which they must name and then battle and attempt to dispel."

19d 1957

Grady Plans Negro Study As Doctors

By FRANK WELLS

Negro doctors will begin training at Grady Hospital about Sept. 1, it was disclosed Thursday in a board meeting of the Fulton-DeKalb Hospital Authority.

Secretary Frank Wilson said that the U.S. Public Health Service would make a grant of $39,000 a year available for the training.

Dr. Asa Yancey, chief surgeon of the Veterans' Administration Hospital at Tuskegee, Ala., is scheduled to head the program, which will offer training to practicing Negro physicians as well as Negro interns.

ASK SOCIAL SECURITY

In other action, the board passed a resolution asking that Fulton County commissioners let hospital employes become a part of the Social Security program under which county employes receive benefits. By joining with the county, the authority will save about $80,000, which it would have to put up as a security fund.

The building and grounds committee report said that bids were still being received on equipment needed for the new hospital. Wilson said the board would have to receive samples of equipment from manufacturers before the bids could be properly evaluated.

"The acquisition of equipment is going so slowly that I estimate it will be spring of 1958 before we get into the new hospital," Mr. Wilson told the group.

NOTICE TO EMORY

The trustees voted to give notice to Emory University that it would not need the buildings in the area belonging to the school after September 1958. Notice of one year is required in the contract between the two organizations. They also voted a resolution expressing appreciation for Emory's buildings.

In another resolution the board voted to express appreciation to Constitution reporter Katherine Barnwell, who has been promoted to a position on The Journal-Constitution Sunday Magazine, and who covered board meetings for several years.

The resolution expressed appreciation for her "ethical, fair and accurate" reporting of affairs of the board.

Dr. Hill Defines Hospital As Community Institution

BY EDDIE WILLIAMS

Nine outstanding staff members of the Hughes Spalding Pavilion were honored Wednesday during the third annual Michael A. Weinstein Memorial Award Program.

The program is named in honor of the late Dr. Weinstein and is designed to stimulate interest among employees at the Pavilion. Dr. Weinsein's son, Dr. A. A Weinstein, and Mrs. Pearlie Melville, director of nurses at Hugh Spalding, presented the awards.

Mrs. Goldie Cato Lowe received a special award for being "the best all-around nurse" at the institute. Annual awards, which included certificates, $25 stipends and pins, went to Mrs. Susie Baynes, RN, outstanding nurse of the year; Miss Mary Fears, outstanding aide; Mrs Ella Brown, outstanding maid; and Frank Smith outstanding orderly

Annual awards are given to the persons receiving the most monthly citations in the various categories. Monthly awards were given to Mrs. Reatha Ward, RN, outstanding nurse of the month; Mrs. Lois Hightower, outstanding aide; Mrs. Ella Brown, outstanding maid; and Oscar Gresham, outstanding orderly.

Dr. Mozell Hill, chairman of the Department of Sociology of Atlanta University, was guest speaker on the program which was held in the Pavilion cafeteria. He spoke on "the hospital as a community institution.

Dr. Hill remarked that every individual is endowed with the right to life, liberty and the pursuit of happiness. These rights cannot be fulfilled, however, without first satisfying the human right to health he said.

Dr. Hill also reviewed some of the functions of a hospital and added that "any efficiently operated hospital is the result of hard work on the part of many people such as Dr. Weinstein."

Dr. Weinstein later commended Charles H. Wilson, Jr., administrator of the Pavilion which is affiliated with the Grady Memorial Hospital and all of his staff for their outstanding work and said "there are many other awards which should be given."

Others appearing on the program were the Rev. H. I. Bearden, pastor of Big Bethel AME Church, T. L. Holder and C. B. Yates, A member of the Hughes Spalding Advisory Board. The Morris Brown College Male Chorus sang several selections. Administrator Wilson introduced the speaker and acted as master of ceremonies.

GEORGIA

Old Grady Hospital May Be Retained For Some Use

By GEORGE M. COLEMAN and EDDIE WILLIAMS

(This is the third in a series of articles aimed at acquainting the public with the new Grady Hospital.)

The vacated buildings in the old Grady Memorial Hospital setup will be retained and possibly converted to some practical use when the compact medical center opens next month.

Some buildings, such as the Albert Steiner Cancer Clinic, and the administration building are in relatively good condition and could provide sorely needed classroom space once they are vacated. The old buildings such as the original medical college where the Negro hospital is now located might be torn down. Officials say the cost of renovating some of these structures would surpass their actual value.

Negro and white student nurses will continue to use their present dormitories since no quartering facilities are provided for them in the new building. Officials anticipate the construction of two sizable up-to-date residences in "the near future" to eliminate overcrowding situations. They say "the day is past when you can expect four student nurses to occupy the same room. Over and beyond this, in order to service our new hospital, it will be necessary for us to have more student nurses than we can accommodate at present."

Excluding nurse residence, other Grady facilities will be located in the new building which reportedly "should be able to look after the needs of eligible patients without any necessary additions . . . for the next 30 years, or possibly longer."

If expansion is necessary, the Fulton-DeKalb Hospital Authority which directs Grady, has at its disposal a considerable amount of property adjacent to and about the old and new buildings. The authority owns the entire Piedmont frontage stretching from Edgewood Avenue to Gilmer Street, a distance of two city blocks. Other property is located on Coca-Cola Place, Edgewood and Butler.

The authority, in conjunction with the Federal Government and the State of Georgia, "sponsored and erected" the Hughes Spalding Pavilion. Except for a ward of obstetrics cases for Grady, the Pavilion serves prite patients. With the opening of the new Grady Hospital, these patients will be transferred to OB wards in the new building.

The new building was constructed at a cost of about $25 million and is situated on land purchased from Emory University at a cost of $87,400.

The operating expenses of the new facility will be much greater than those of the old for several reasons. The authority, in its 11th Annual Report for the year ended Dec. 31, 1956, reported experiencing a constant increase in operating costs. Another reason is that the new hospital will use the old equipment plus "train carloads" of new paraphernalia.

Increases are also expected in other areas. In 1956 the cost per outpatient visit was $2.28, and the cost per day for bed patients was $15.65.

In order to attract the best personnel and provide the most adequate services the hospital "will be forced to materially increase the stipends of interms, assistant residents and residents."

Increases are also expected in other areas. In 1956 the cost per outpatient visit was $2.28, and the cost per day for bed patients was $15.65. That year hospital operated on an income of $3,737,232.37, and $3,053,028.24 came from tax assessments in Fulton and DeKalb Counties. The remainder came from patients' fees and auxiliary services.

The trend indicates that all this might result in an increase of taxes.

But this thought will not foremost in the minds of visitors when they walk through the tile-laden halls of the new building next month. Its magnificence will play up its immediate goal: to provide the best medical service for the greatest number of people.

Officials Say 50 Per Cent Of Grady For Negro Patients

Daily Mail, Atlanta, Ga. Tues. 10-10-57, p. 1

By GEORGE M. COLEMAN and EDDIE WILLIAMS

(This is the second in a series of three articles aimed at acquainting the public with the new Grady Hospital.)

The beautiful new Grady Memorial Hospital building has apparently been designed to uphold Southern tradition while seeking to meet the needs of a rapidly expanding city and keeping a wary eye on the future.

The physical layout of the $25 million building approaches the ultimate in the so-called separate but equal doctrine, and officials declare that 50 per cent of the hospital will be used for Negro patients.

Whether or not facilities, equipment, and personnel will be equated between the two hospitals-colored and white — cannot be determined until the center is opened.

Tentative opening date is sometime in January.

"COLORED HOSPITAL"

The hospital has an impressive main entrance on Butler Street, guarded by huge stone statues of Hippocrates, "The Father of Medicine," and Hygeia, the goddess of health. This entrance leads the visitors through multiple glass doors and up stone stairs to the first floor.

Immediately upon entering the first floor one will find himself before an admission desk. This, a guide said, is the "white hospital's entrance." Down the hallway are administrative offices and public relations suites.

At the rear of the building, on Pratt Street and exactly one story below the Butler Street entrance, is another main entre to the building. Similar in design and boasting a large waiting room, this entrance is to the "colored hospital."

So far there are no racial designations on the outside of the building. Although it was not definitely stated that Negroes will be denied access to certain parts of the building, a spokesman indicated it would be "unusual" for them to be in certain areas.

SIGNS APPEAR

Negro patients entering the hospital will not see any signs of indications of racial discrimination, that is, if they enter and leave by the entrances and exits prescribed.

It is only in the main corridor of the colossal structure that actual signs ordering racial separation are found. Here "colored" and "white" signs are posted on doors to rest rooms and staff lounges. No labels have been placed on water fountains, however.

This is also true on other floors where staff members of both races are expected to work but such signs do not appear in patients' areas.

CLINICS FACE GILMER

Most of the eastern and southern portions house the Negro hospital and emergency clinic. The clinics, both facing Gilmer Street, are designed much like the old railway ticket offices. Negro patients will be brought in on one side of a receiving booth and white on the opposite side.

No room is left for speculation on the improvements and advantages the new hospital will have over the old. It will represent one of the finest medical facilities in the country. Although the new building makes no provision for housing nurses, hospital officials, recognizing obvious overcrowding in the old Old Grady Medical Center, stated:

"It will be essential within the near future for us to provide adequate housing for our student nurses, both white and colored. We must have two sizable up to-date nurses residences to look after this situation."

Many bad situations have been remedied by the construction of the new building and the proposed equipment it is expected to house Plans are in the mill to eliminate others; and some remain.

Whether or not the physical layout of the new building anticipates segregation problems is unknown. Although the layout indicates a plan for separation and equality, it also points to the hospital's wary eye on the future i nthat desegregation could be effected over night with the removal of a few signs and the lowering of several petitions.

Infant Succumbs After Dismissal From Hospital

Daily World
Atlanta, Ga.
Fri. 3-22-57

A seven month old infant Wednesday became the third person within three months to die after being treated and dismissed from Grady Hospital,, police reported.

The baby was identified as a Linda Lattimore, of 83 Hammock Place, S. E.

Hospital records showed the little girl was treated and dismissed from the Grady Hospital Emergency Clinic at 1:30 P. M. Monday At that time, doctors said the child's temperature was up to 160 degrees and she apparently was in the grips of pneumonia. Her death was discovered about 12 hours later.

Ptl. D. L. Pike and H E. McGehee said the baby's aunt, Miss Corine Brooks, 20, told them she was awaken around 2 a. m. by the infant's mother, Mrs. Louise Lattimore, 26. She was quoted as saying her sister, in a "hysterical" condition, told her the baby would not move. The aunt took the child to the hospital in a taxi cab where it was prounounced dead on arrival.

Other deaths occuring at Grady Hospital include two women who succumbed to head injuries shortly after being dismissed. They were Mrs. Astoria Adams, 122 Yonge St., N. E and Mrs. Ida Lesesne 76 of 406 Merritts Aven, N E

Mrs. Lesesne died around 6 a. m March 6 less than two hours after she was treated and dismissed from the emergency clinic.

Mrs. Adams died Feb. 6 at the home of her brother after she was treated and dismissed earlier that day.

Play Written By Grady Nurses To Be Presented

Daily World
Fri. 3-26-57

TUSKEGEE, Ala.—The role of Community Organizations in the adjustment of discharged patients will be highlighted in a play to be presented Wednesday March 27, 1957 at 2:30 P. M. in the Recreation Building at the Veterans Adminstration Hospital, Tuskegee Alabama, according to Dr. Prince P Barker, Director of Professional Services at that hospital .

The Drama, written and produced by the affiliating student nurses from Grady Memorial Hospital Atlanta, Georga, recognizes volunteers and organizations in the patients' home town as valued members of the "hospital team" as it interprets one of the newest programs of the Veterans Administration.

According to Dr. Barker ,there may be many Veterans who must remain in the hospital only because of certain problems existing at their homes which will prevent a satisfactory adjustment. Volunteers and their organization may, in many instances, aid in the solution of these problems thus permitting the patient's discharge and making a hospital bed available for a veteran requiring active medical treatment.

The Hospital's Voluntary Services Advisory Committee. as well as hospital staff members, will witness the drama and an invitation has been extended representatives of organizations in surrounding cities to attend.

Griffin for his previous endorsement of such an institution and called for the State Legislature to appropriate money for its establishment "as rapidly as possible."

Grady Nurses At Tuskegee

Atlanta, Ga.

Five Ministers Ask Hospital Improvements

Defender
Sat. 4-20-57
Chicago, Ill.

AUGUSTA, Ga. — Five Negro ministers asked for improvements for Negro facilities at University hospital in a conference with Hospital Authority Chairman R a y Campbell recently.

Rev. N. T. Young, sr., of Thankful Baptist church, spokesman for the committee, charged that the 36 beds at the institution are "far too few to meet the needs of Richmond County's 50,000 Negro population." n

The ministers said an inspection of the hospital found that there are 33 ward beds for men in the Lamar Wing and 36 ward beds for women, with only one bathtub each for men and women patients.

They also asserted that all Negro wards "are crowded beyond endurance and that only two private rooms and a semi - private room are available to Negro patients."

The clergymen complain that psychiatric and other patients are being kept together.

Other members of the committee included the Rev. R. L. Boyd, the Rev. W. M. Robinson, the Rev. C S Hamilton and the Rev M. J. Whitaker.

at Hughes Spalding Hospital here, according to Dr. Frank Wilson, supt. of Grady Hospital.

Dr. Wilson said he expected official notification in approximately two weeks.

The new educational program is expected to get underway sometime this fall and will be headed by Dr. Asa Yancey, who is presently in charge of surgery at the Tuskegee Institute hospital. The program will provide training for Negro interns and resident physicians. Dr. Wilson said an application for funds for this program was submitted last year.

Help For Retarded Negro Children

Daily World Fri, 1-18-57

At last there comes a long past due obligation to be discharged upon the honor of the Georgia General Assembly for provisions for retarded Negro children.

Atlanta, Ga. P. 4

The color of these citizens should not in anywise militate against their interest and general health conditions.

For many decades these children, because of their race have been thrust to the whirlwinds of society, to be neglected in the homes, pushed around or shunned at school by their fellow students.

Governor Marvin Griffin has said that if the General Assembly does not appropriate funds necessary for construction of a school, he will use surplus state funds to do the job. That is fine.

In some Georgia schools, teachers noting the deficiency on the part of those children they regard as "slow", have divided into such a section, these handicapped children. A special teacher with some training in the field of bringing up delinquents have more than oft been placed in charge. These retarded children who are "curable" have been slowly coached for integration into the regular mill-stream of pupils. Others, because of the lack of facilities and trained specialization have been unable to make the grade and hence remained "retarded."

Many a jewel has been possibly thrown to the win through this process while many might have been reclaimed.

At any rate the governor poses a long-felt need; he envisions a duty owed the unfortunate Negro children and expresses determination to do something about it. For many years a state school has been provided near Augusta for retarded white children.

Here is hoping that Gov. Griffin will follow through as quickly as possible in establishment of a school for retarded children of our race if they cannot be provided for in the school now in operation.

Retarded Negro Child Aid Urged

P 20
Convention

SAVANNAH, Jan. 14 (AP)—A resolution urging establishment of a school for mentally retarded Negro children was adopted at the quarterly meeting of the board of directors of the Georgia Assn. for Aid to Retarded Children here Sunday.

Jour. 1-15-57

The resolution commended Gov.

Hughes Spalding May Get $39,000 For Education

Daily World
Atlanta, Ga.
Tues. 2-26-57

The U. S. Public Health Department in Washington yesterday unofficially announced that $39,000 had been allocated for an educational program for Negro physicians

Will Seek to Amend Hospital Construction Act

Washington,—A national conference on racial integration in hospitals, held here last week, voted unanimously to seek an amendment to the Hospital Survey and Construction Act of 1946, deleting provisions for racial separation.

The conference, described by its chairman, Dr. W. Montague Cobb of Washington, as the first of its kind, was sponsored jointly by the National Association for the Advancement of Colored People, the National Medical Association, and the Medico-Chirurgical Society of the District of Columbia.

Dr. Cobb is chairman of the NAACP National Health Committee as well as a member of the Association's Board of Directors.

Sound Program

Commenting on the conference proceedings, Dr. Cobb said: "A large amount of little-known information was secured, which laid the basis for a sound program for future constructive action." A second meeting is planned for next year, he noted.

In addition to specifically seeking an amendment to the Hospital Survey and Construction Ace, the conference voted unanimously to work "continuously and vigorously, in a spirit of amity" until racial "discrimination has been eliminated from hospitals in the United States."

The delegates heard a proposal from Rep. Barratt O'Hara of Illinois that private voluntary hospitals which practice racial discrimination be deprived of their tax exemption status as a just penalty for such practices.

Other Speakers

Other speakers at the conference included Congresswoman Florence P. Dwyer of New Jersey; Roy Wilkins, NAACP executive secretary; Dr. T. R. M. Howard, president of the National Medical Association; Dr. Edward C. Mazique, president, Medico-Chirurgical Society; and Dr. Robert S. Jason, dean, Howard University College of Medicine.

Conference sessions dealt with the incompatibility of racial discrimination with good hospital policy, the necessity of free access to hospital facilities in order for physicians to render maximum service, and conditions in local hospitals including those built with federal funds appropriated under the Hill-Burton Act.

19d 1957 ILLINOIS

EMERGENCY

Chicago's Provident, Busy Hospital, Gets Emergency Every 19 Minutes

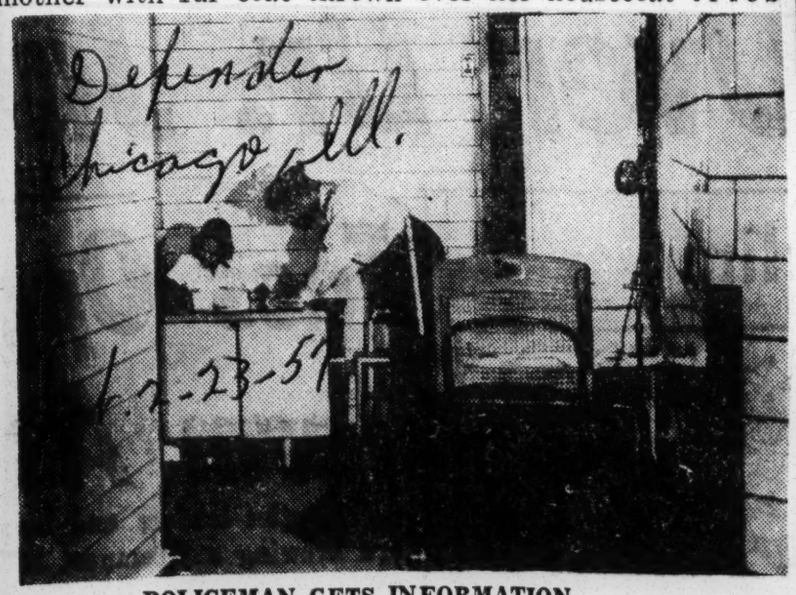
Defender Chicago, Ill. p. 2
Sat. 2-23-57

By L. F. PALMER, JR.

Tempers flare in a saloon and a man is stabbed . . . A woman falls down a flight of stairs . . An abcessed tooth routs a man out of bed at 2 in the morning . . . labor pains grip an expectant mother . . . A d r u n k is found sprawled in an alley . . . and from all points ambulances, cabs, police and private cars head for Provident Hospital's Emergency Room.

The Emergency Room — where tragedy, heartbreak and unbelievable misery blend with compassion and medical skill. Where an anxious husband sits in the waiting room staring into space, fear etched on his face while a medical team battles the ravages of disease to keep his wife alive.

The Emergency Room — where a young, attractive mother with fur coat thrown over her housecoat t r i e s



POLICEMAN GETS INFORMATION

frantically to enter the treatment room where Provident doctors are pumping Clorox out of her tot's stomach.

FILL CORRIDORS

Where the injured spill over into the corridors if fate draws more than four victims to Provident at one time.

Last year, Provident's Emergency Room received, on an average, one patient every 19 minutes for a total of 27,741! This fantastic patient load is more than five times the number treated at the average hospital of equal size.

On holidays and some week ends, the EOR (Emergency Operating Room) at Provident is jammed with victims of illness and violence who arrive at the rate of one every eight minutes.



SKULL SMASHED BY POP BOTTLE

Quite aside from the obvious space and personnel problems this situation presents, Provident is harried by the devastating fact that only about half of the patients treated in EOR pay for their care and the other half pay a below-cost fee.

As a result, the hospital's budget remains in a "state of shock" much like many of the patients it receives.

Patients come to Provident's EOR from distant points, North, South, East and West. One reason for the unusually heavy load is the tradition, linked with social and racial practices, which invariably result in Negro victims' being sped past one hospital after another to Provident's Emergency Room.

In addition, Provident is located in the midst of a vastly populated area and even if it received patients only from the immediate community, the load would be high. Further, people in general do not pay enough attention to safety tips and, for that reason alone, end up in EOR.

To operate Provident's Emergency room, a medical team remains on 24-hour duty. The team consists of an interne, a nurse and a clerk. On call and available at a moment's notice are four resident physicians, a nurse supervisor and an attending physician.

Should a mass tragedy strike, all medical and nonmedical personnel of the hospital can be summoned quickly via a specially prepared emergency plan.

Vast amounts of drugs, and dressings as well as expensive surgical instruments and equipment are kept on hand to meet the unbelievably varied emergencies which demand treatment.

This is Provident's EOR — a small, well equipped emergency operating room geared to handle 5,000 emergencies a year, a sizeable job. Instead, Provident rolls up its sleeves, forgets the statistics and cares for the patients as they come.

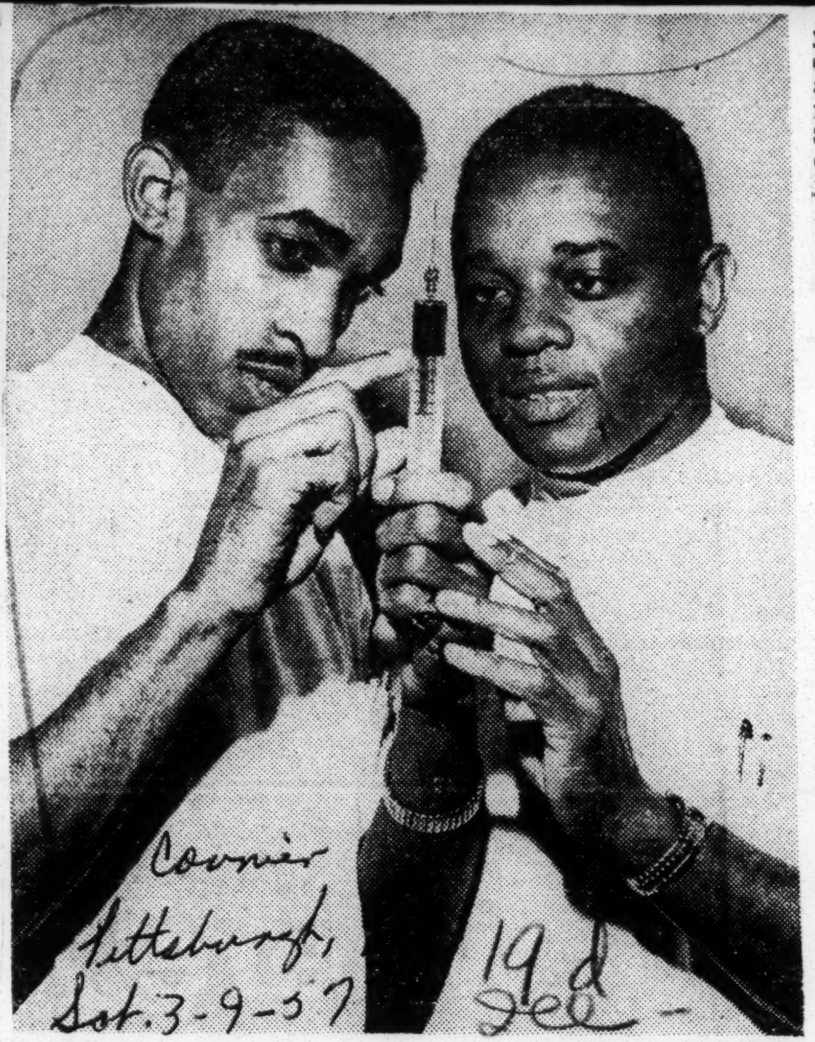
They come . . . and they come . . . and they come. Last year there were 27,741.

This year,

Who knows?



RARE MOMENT OF RELAXATION FOR THE DOCTOR



Courier Pittsburgh, Sat. 3-9-57 Ed

History Makers — For the first time since Chicago's Provident Hospital School of Nursing was founded in 1891, male students will be listed among the graduates at the school's 1957 finals, to be held May 8 in the Washington Fieldhouse. The male students making Provident history are Arthur Goode of Asheville, N. C., and John Aaron of Little Rock, Ark.

Doctor Reviews Outlook Of Chicago Hospitals

Call Fri. 3-29-57
Kansas City Mo.
P. 28

CHICAGO—(ANP) — Dr. Robert Stepto, newly elected president of the Cook County Physicians association and one of four Negroes in the country with a Ph.D. in pathology, reviewed the hospital picture as it exists currently in Chicago, with emphasis on staff personnel and patients.

The review was given in Dr. Stepto's inaugural address as he ascended the presidency of the county medical unit.

Speaking of hospitals, particularly as relates to the availability of hospital beds for private and indigent medical Negro patients, he said:

"Definite progress has been made in the direction of establishing a South Side branch of the Cook County hospital. During the year (1957) we will have a discussion on the relocation of population, population trends, and reasons for choosing a hospital site on the South side for the medically indigent.

"In the same vein, the Chicago Commission on Human Relations has visited hospitals to discuss the anti-discrimination amendment to the hospital ordinance and related human relation topics.

Aged And Chronically Ill

"Still another matter of great concern . . especially as regards the aged and cronically ill patient, is that of the nursing homes. The central service for the chronically ill of the Institute of Medicine has studied this problem extensively. Their studies have shown that 90 per cent of the nursing homes are below standards to be adequate."

He proposed that the county group give its support to the educational and resource program of the American Cancer society, particularly that phase which plans a regional zoning of a south central branch of the Illinois division located in Chicago.

The new president of the Cook County physicians group is just 36 years of age. At this relatively young age, he is chief of cytological research at Loyola university, and assistant professor of obstetrics and gynecology, Loyola's Strich school of medicine. He has contributed 14 articles to medical journals.

A fellow of the American College of Surgeons; chairman, department of obstetrics and gynecology, Provident hospital, and attending physician, Lewis Memorial Maternity hospital, he was born in Chicago, Oct. 6, 1920.

Is Honor Graduate

He graduated from Englewood high school in 1938 as an honor student. He won a scholorship to Northwestern university in less than four years. He then entered Howard university medical school, from which he graduated in 1944 as top man of his class.

From 1944 to 1946, he served in the army medical corps. Later he matriculated at the University of Chicago medical school, winning the Ph.D. degree and election to the honorary Sigma Xi fraternity.

He has received fellowships from the American College of Surgeons, Institute of Medicine, American College of Obstetrics and Gynecology, and the American Society of Clinical pathology.

He began private practice in 1948 and has since become a member of the Chicago Medical Society, Endocrine society, Chicago Pathological society and the National Medical association.

He is married to the former Ann Burns, a Northwestern university graduated and former school teacher. They have two children, Robert 11, and Jan 4.

Chicago hospitals asked to end discrimination

Afro-American Sat. 8-3-57
Baltimore Md.
P 9

CHICAGO (ANP) — The Chicago City Council health committee last week passed a resolution calling upon local hospital officials to wipe out alleged discrimination against colored physicians in staff appointments and urged corrective measures by the board of health and the city corporation counsel.

The committee, headed by Alderman William H. Harvey, colored, of the city's Second Ward, took the action after hearing witnesses testify against the alleged discriminatory practices at the city's hospitals.

One witness, Dietrich C. Reitzes, University of Chicago sociologist, stated that his survey revealed that the present total of 226 colored physicians is fewer than in the past because of the difficulties encountered by them in obtaining staff appointments.

* * *

ANOTHER TESTIFYING at the committee hearing the previous day was Douglas R. Turner, director of community services on the City Commission on Human Relations. Turner said that he conducted a survey during which he interviewed 56 Chicago hospital administrators and found the following.

1. **Administrators of 46 of the hospitals said they had no colored physicians on attending staffs.**
2. **Five reported a total of 16 colored staff physicians, and**
3. **Five said they had colored doctors in the past, but none at present.**

His survey also showed 55 hospitals with colored patients, but only in 23 instances were they admitted as private patients of staff physicians.

Federal Agency Denies It Gave Funds To Biased Hosp.

Daily World Atlanta, Ga. p.1
Wed. 2-27-57 19d La.

WASHINGTON — (ANP) — The Department of Health, Education and Welfare denied last week that it had approved federal funds for the construction of a segregated hospital in St. Charles Parish, Louisiana.

The denial came as the result of a question raised by an ANP reporter at Secretary Folsom's press conference a few days earlier. The reporter claimed that she had information to the effect that a suit was pending in the Supreme Court of Louisiana testing the legality of a local bond issue. The bond was allegedly being floated for the purpose of raising funds to match approved federal grants allocated for the construction of a hospital to have segregated facilities.

A group of Louisiana citizens objecting to the use of public funds to maintain segregation in hospital facilities filed the suit. They are being represented by Atty Morris B. Gotlin.

Gotlin stated that he contacted Marion B. Folsom, Secretary of HEW, asking for clarification of the federal government's policy for allocating funds for public hospitals. He questioned the constitutionality of such allocation under the provisions of the Hill-Burton Act. He also inquired about the legality of holding a bond election to raise public funds for a segregated hospital.

When the attorney did not hear from HEW in a reasonable length of time, he contacted a Congressman on the matter and urged him to press the HEW secretary for a reply.

The Congressman contacted Mr. Folsom still no reply was immediately forthcoming. The matter was then brought directly to Mr. Folsom's attention by the ANP reporter. The secretary informed her that the matter had not been brought to his attention.

Later, however, an HEW spokesman informed the reporter that the matter had been investigated and no application for federal assistance for that area had been made to the national office. A check was made in the Regional office at Dallas, Texas, but no such application was recorded.

Since no application was found the HEW spokesman said it was evident that no approval could have been made. He admitted, however, that such a case was pending in the Louisiana courts. They could give no explanation on how public matchings funds could be raised on a local level when there were no federal funds to match.

HEW claims that it is still investigating the situation in hope of getting to the bottom of it.

Private Hospitals Should Treat More Negroes-Kerne

Weekly New Orleans, La. p.3
Apr. 5 - A-57

Dr. Leo J. Kerne, director of Charity Hospital, advised on Monday at a meeting of the Charity board of administrators, that private hospitals of greater New Orleans should assume "greater responsibility in providing medical treatment for Negroes."

The hospital administrator recommended that "a long range program should be started and private institutions encouraged to provide medical care for Negroes not eligible for admission to Charity Hospital."

The recommendation was made by Dr. Kerne to the hospital's board as a possible way of reducing the operating costs of Charity which are increasing daily.

According to the report of Dr. Kerne, Charity is expending a major portion of its appropriations treating Negroes who by their incomes are not eligible for Charity State care.

A report for March operations indicated that 4,259 Negro patients were admitted as compared to 1754 white patients, with 913 Negro babies delivered to 97 white.

From a source it has been learned that many of the "white" private hospitals receive large grants on the presumption that both white and Negroes are given medical care, and in an effort to meet the requirements "the domestic help of white people are treated in out-patient clinics."

Why hospital turned down $5 million

Afro-American p. 12

Sat. 1-19-57

BALTIMORE

Why did the Provident Hospital board of trustees turn down a proposal by State Sen. Harry A. Cole that would have made the hospital a state institution and authorized a $5,000,000 bond issue for its purchase and improvement?

This was the question that arose this week and to answer it, Howard Murphy, president of the board, listed three factors which he said played important roles in the board's deliberations that produced the ultimate decision.

As listed by Mr. Murphy, the factors were:

* * *

1. A $72,000 GRANT from the Ford Foundation—In December of 1955 the Foundation signified its intention of making the $72,000 grant to Provident and the trustees felt that they could not accept the money in good faith if there was any intention of turning Provident into a state institution.

The money is designed to strengthen and extend Provident's services to the community.

* * *

2. THE DECLARATION OF INTENT—In the summer of 1956 the trustees adopted a Declaration of Intent in which they said:

"We propose, within the measure of our means, to conduct Provident Hospital as a voluntary general hospital dedicated to the relief of whoever is sick or injured and can be properly taken care of within its walls."

This decision to remain a "voluntary" hospital was discussed at length with the trustees later reaffirming the stand that because of the need of such a hospital as Provident in the northwest section of the city and the need for hospital beds, that Provident should be continued on a "voluntary" basis.

* * *

3. THE COMMUNITY CHEST—While the Community Chest has been reducing its aid to Provident Hospital as the financial picture of the hospital improves, the trustees felt that as long as there is a need for subsidization the Chest will supply funds.

With these three determining factors, Mr. Murphy said the decision was taken that the hospital should not be made into a state institution.

* * *

THE QUESTIONS about the action of the board arose after it was revealed that the trustees had been informed of Senator Cole's desire to introduce a measure into the current session of the legislature and had decided that Provident should remain free of state control.

After learning of the board decision, Senator Cole said that he would not introduce the bill in view of the board's attitude.

When asked to comment on the board's decision, J. Arnett Frisby, who has been nominated as the new president, declined to make any statement.

It was learned however that the board had been advised prior to its decision that Maryland does not provide hospital care for patients suffering with acute disease except in the case of indigents, and even here it relies on the facilities of voluntary hospitals.

The board was advised that the hospital should not seek a special subsidy from the state or "special favors" from the legislature to keep it going.

19d 1957

Mentally Ill Being Helped By New Drugs

Daily World
Atlanta, Ga.
Wed 2-27-57

MILLEDGEVILLE, Ga. — (INS) — New tranquilizing drugs are successfully restoring a large number of mentally ill people, the head of Georgia's state Mental hospital said Tuesday.

Dr. T. G. Peacock, superintendent of Milledgeville State Hospital, said the new drugs, "administered by qualified physicians, have proved very effective in the cure and treatment of various mental illnesses."

Dr. Peacock said that through use of the drugs, and an increase of qualified doctors and personnel at the hospital, a larger number of patients are being restored.

Additional funds expended for drugs was an important factor in the success of the hospital in returning patients to their homes, Dr. Peacock said.

He explained:

"The state administration is now spending $73,000 per quarter for drugs, whereas they were spending only $18,000 per quarter in 1952."

There are fewer people being readmitted to the hospital today, Dr. Peacock said, and fewer new admissions are being made.

He said the hospital's population increased by 533 in 1953, while the 1956 increase was only 143 patients.

MENTAL HEALTH WEEK APRIL 28 THRU MAY 4

Daily World Aug. 4-21-57
Atlanta Ga.

The Atlanta Association for Mental Health has been in existence only eight years, and in that period it has become increasingly evident there is a growing need here for a mental health service center equipped to give services beyond the realm of education. P.3

Their bold and positive conclusion comes from the association's report of progress, problems and future hopes, made public during Mental Health Week, April 28 through May 4.

In Atlanta approximately 82,222 people are suffering from some form of mental illness ranging from emotional maladjustment to acute psychosis. This total is further broken down as one person in every four families as a sufferer.

The picture in Atlanta may be slightly better than for Georgia on the whole however. Released facts show there are 12 mental health associations in Georgia, with only four receiving some financial aid from the Community Chest. These four, though in great need of improvement, are located in Atlanta, Albany, Savannah and Athens.

However, the menta lhealth picture shows an even greater need of improvement than before. Ironically the number of persons seeking admission to the state hospital in Milledgeville is increasing, while the number on a national scale shows a decerase.

At present, there are approximately 12,000 patients in Milledgeville, described as the second largest such institutions in the world. However, there is but one private institution in Atlanta for mental patients, no psychiatric beds in our general hospitals, one child guidance clinic, and one small mental health clinic. This makes it virtually impossible to care for the needs of the estimated 82,222 Atlantans who must have treatment.

It is for this reason that all Atlantans are being asked to obtain membership in the association during Mental Heatlh Week. The state association's campaign goal is for $248,000. This is to be used to spearhead efforts to provide adequate facilities, aid in education and research and assistance to local chapters.

The Atlanta membership goal this year is 20 000 members. Its purpose is to help the mentally ill and their families, provide education, scholarships, research and promote facilities for better care and treatment. This would also make it possible to establish the much needed Mental Health Service Center.

PLANS OUTLINED FOR MENTAL UNIT

Times P.23

Harriman Expects Building of New Hospital in Bronx to Begin in Two Years

New York, N. Y.

Plans for building the first new mental hospital in the state in twenty-five years were detailed here yesterday by Governor Harriman.

The Governor made the announcement before inspecting a model of the proposed $70,000,000 hospital in the State Building at 80 Center Street.

The new institution is to be built in the East Bronx adjacent to the Albert Einstein Medical Center, which is part of Yeshiva University. It is designed to accommodate 3,000 mental patients. Jul a. 4-30-57

The Governor said the new hospital was intended to reduce overcrowding in existing hospitals in the metropolitan area.

"Its urban location," he said, "is in line with today's philosophy of establishing mental hospitals in the population center, where both professional and non-professional staff is readily available, visitors have easy access, and the institution can operate as a psychiatric center for the community."

Mr. Harriman said it would take about two years before the construction could get under way and about five years from now before the structure could be completed. He explained that the 126-acre site was marshland that would have to be filled in before construction could begin.

Rinancing for the hospital will come from the $350,000,000 bond issue approved by voters in 1955 to improve psychiatric facilities in the state.

To Consist of 8 Buildings

Mr. Harriman said the hospita would consist of eight major buildinfs spread over the site and its work would be conducted in cooperation with the Albert Einstein Medical College.

The hospital site runs along the Hutchinson River Parkway between Morris Park Avenue and Bronx and Pelham Parkways.

Dr. Paul H. Hoch, State Mental Hygiene Commissioner, said the hospital would serve Bronx residents. He said it would provide both inpatient and outpatient care, including the new type of day hospital service. Under this system, some some less seriously ill patients spend the day under treatment and return to their homes at night.

The major buildings to be constructed are: medical and surgical, admission, geriatric, diagnostic, research, a unit for patients requiring long-term care, a community center and an occupational therapy center.

In other ceremonies at the State Building, the Governor:

¶Toured the building as part of the observance of "Open House Week" for state agencies. He had urged all citizens to visit state agencies to see how they serve the taxpayers. The observance began yesterday and will end Friday.

¶Presented Mrs. J. Robert Johnson with a citation for her selection as "New York State Mother of the Year." The citation was from the American Mothers Committee Association, a national organization that sponsors the "Mother of the Year" award.

The 51-year-old Mrs. Johnson is the wife of Judge J. Robert Johnson, surrogate and county judge for Schoharie County in upstate New York. She is the mother of three daughters and is a social worker at Letchworth Village, a school for retarded childrren in Thiells, N. Y.

Mental Health Week

Herald Tribune

April 28 to May 4 Set by Mayor to Aid Drive

Tues. 4-16-57

Mayor Wagner yesterday proclaimed the week of April 28 to May 4 as Mental Health Week and, in a brief City Hall ceremony, received Miss Lois Cahn, eighteen, a college girl who was a patient in a mental hospital for five months. P.17

Mrs. Donald Agnew, president of the State Mental Health Society, introducing the girl to the Mayor, said she was a "living symbol of this year's mental health campaign slogan, 'The Mentally Ill Can Come Back. Help Them.'"

New York, N.Y.

The ceremony marked the opening of annual fund-raising campaigns by the state society and the five borough mental health societies.

Mental Hospital For City Is At Least Two Years Away

Commercial Appeal Mon. 5-6-57
Memphis, Tenn.

By PHILLIP THOMAS P.1

The multi-million dollar mental hospital scheduled for Memphis is at least two years away, Dr. C. J. Ruilmann, state commissioner of mental health, said yesterday.

In an appearance on WMCT, The Commercial Appeal television station, Dr. Ruilmann said such preliminaries as hiring an architect, preparing drawings and getting bids must be gotten out of the way before the structure can become a reality.

During the Know Your Government program, Dr. Ruilmann disclosed Memphis is a "strong candidate" for the location of a state hospital for mentally ill children.

After the telecast, Shelby County Commissioner Dan Mitchell, a program panelist, said the site for the assured hospital is still to be chosen "but when the state is ready, we will give them support. The city and county are already committed to provide the site."

Described As 'Desirable'

Mr. Mitchell said a site south of Poplar and immediately east of Dunlap has already been suggested to the state as one of two likely sites. Russwood Park, home of the Memphis Chicks, is in this general area, he said.

Dr. Ruilmann said he would "prefer a site of about 200 acres for the hospital, but I'm willing to sacrifice that in order to locate as close to your city's medical center as possible.

"Certainly the Russwood Park site would be a desirable one. The hospital could be built on a four to five acre site."

Care For 1,000

The building would cost about $2,500,000 to $2,750,000 to construct, according to Dr. Ruilmann, and would care for about 1,000 new patients every year. He said the annual operating budget would be about $550,000.

Appearing on the program with the two officials were Dr. L. M. Graves, director of the Memphis and Shelby County Health Department, Dr. T. S. Hill, director of the Memphis Alcoholic Rehabilitation Center and superintendent of Gailor Psychiatric Hospital, and Mrs. Beverly Rhea, president of the Memphis and Shelby County Mental Health Society.

Dixie Trends—

GROUP FIGHTS TABOO ON MENTAL HEALTH

Commercial Appeal P.11

Most States Have Made Gains In Aiding Afflicted

Memphis, Tenn.

BUT MUCH MORE NEEDED

Sun. 5-5-57

By PAT J. M'DONNELL
International News Service Writer

ATLANTA, May 4. — "More children will go to a mental hospital than will go to college," Carsbie C. Adams said soberly.

The astounding declaration brings into sharp focus, Mr. Adams believes, a basic problem largely being ignored today, in an era when mankind is making the greatest advances toward general health.

Mental health today, Mr. Adams feels, is perhaps the last great frontier to be forcefully attacked with knowledge, finances and, most important of all, public realization and acknowledgement.

Mr. Adams, a comparatively young man with a string of degrees, including a Ph.D., is one of a small band of men struggling to loosen mental health from taboos and false shame—the same "hush-hush" atmosphere which once shrouded tuberculosis, cancer and other one-time unmentionable ailments of man.

'Greatest Single Need'

"The greatest single need in combating mental illness," Mr. Adams feels, "is public enlightenment as to its cause and extent, and the realization that it can happen to you."

Some nine million people in the United States today suffer from mental illness or personality disturbances. If these ravages into normal, productive lives continue, about one of every 12 children born this year will at sometime in their lives require hospitalization for mental illness.

"There has been much notable progress in the treatment of mental illness," Mr. Adams observes, "but there is still that hesitancy on the part of the public, that embarrassment and stigma, which first must be removed before an all-out attack is possible."

Public Awareness

Mr. Adams rates public awareness as a primary requisite to public support for research and for better treatment facilities.

"Unfortunately," he concludes, "the average person feels this is something which will affect someone else—but he's wrong."

"If a man's wife has an appendectomy it becomes a subject of conversation in the neighborhood for weeks," he said, "but if she goes to a hospital for psychiatric treatment, the family tells everyone she's off visiting Aunt Martha."

Mr. Adams sees some 2,000 mental patients a year. He operates a private sanitarium in Atlanta, which is much like some 30-odd other institutions in ten Southern states. The number of treatment centers is piteously small, in relation to the problem. Georgia, for example, has 10,752 beds in private general hospitals, but only 240 psychiatric beds in private hospitals.

Public Hospitals Crowded

In all states, the public-operated mental hospitals are crowded to such an extent that officials say effectiveness of treatment is reduced so that many patients who might be helped get only custodial care.

The small hospitals are a far cry from the old movie-version of the dreary, high-wall-enclosed asylum buried in a deep wood where restraint is the keynote. The hospital in Atlanta is a picturesque building with stately white columns, not unlike many of the fine homes in the neighborhood. Inside there is a homelike, almost country-club atmosphere. A big part of today's therapy is a feeling of freedom, of relaxation.

Today, 40 per cent of the patients committed to state hospitals are discharged as cured or improved within five years.

Atlanta's Peachtree Sanitarium reports 97 per cent of its 2,000 patients each year are returned home, a majority of them within three weeks.

Wide Variance

Several factors account for the wide variance. Private hospitals, generally, get patients earlier, greatly increasing the chances of successful treatment. State hospitals, in addition, get the particularly difficult cases from the private institutions, and must retain the incurables.

Mental hospitals, private and state - operated, need more trained personnel. The problem here, however, is better than it was a few years ago. In 1945, there was one physician to 299 patients. Today, the ratio is one to 201. In 1945 there was one nurse with specialized psychiatric training to every 160 patients. Today there is about one to every 80 patients. In some few hospitals today there is one doctor, nurse or other employe for each patient.

Increased Interest Noted

Mr. Adams notes an increased interest in providing psychiatric beds in general hospitals. The trend is encouraging, but because treatment is so specialized, he would prefer to see psychiatric wards in separate buildings, attached to general hospitals. More facilities would aid in a critical area—the training of doctors and nurses. The small private hospitals cannot carry the training load alone.

Finances are a key, and Mr. Adams feels strongly on the point that many insurance companies do not recognize mental illness hospitalization. But early treatment, which can come only with public awareness, remains a major factor.

"It is ridiculous how far families let a patient go before they even seek psychiatric help or hospitalization," Mr. Adams said.

Team Effort Is New Weapon Against Mental Illness

Daily World Thurs. 5-16-57 Atlanta, Ga.

BY EDWIN DIAMOND
(INS-SCIENCE WRITER)

CHICAGO—(INS)— Team effort by ministers and phychiatrists is proving to be a new and valued weapon in America's war on mental illness.

This team cooperation is replacing the former hostility between religion and psychiatriy, a group of chaplains and doctors told the annul meeting of the American psychiatric Association in Chicago today.

DISTURBED PERSONS

The minister supplies spiritual understanding and the psychiatrist brings his scientific experience to the aid of the disturbed person. Rallying of Spiritual and Psychiatric forces is taking place against the background of a recent survey indicating as many as one in every 10 supposedly normal persons has some form of mental disability.

The survey was conducted in Baltimore, Md., by the Commission on Chronic illness, a private research group. The figure does not include some 700,000 Psychiatric patients in the nation's hospitals.

The following examples were cited as evidence of the need and valu of ministr-psychiatrist cooperation:

1. A survey in Phoenix, Arizona showed 40 per cent of the persons questioned would turn to their value of minister-psychiatrist cooptional problems.

COUNSELING CENTER

2 A Non-Sectarian Counseling Center, established by the Metropolitan Federation of Churches of St. Louis and Psychiatrists, is helping hundreds of persons with problems. In the first 200 cases seen, 32 of the persons involved were referred for psychiatric treatment according to Dr. Robert B. Deitchman of Washington University, St. Louis.

3. Pastrol Counseling Center sponsored by the Greater Worchester, Mass., area council of churches has recently opened. Dr. E. Adams Daneman and the Rev. John L. Smith reported plans to expand Psychiatric training of practicing protestant Parish Ministers.

4. The Interfaith Association of Mental Hospital chaplains now has a membership of 215 according to the Rev. Ernest E. Bruder of St. Elizabeth Hospital, Washington, D. C.

MENTAL ILLNESS GETS OPEN DOOR

Times-Picayune New Orleans, La.

Patients Work, Live in Complete Freedom

Tues. 5-28-57

By HENDRIK J. BERNS
(Chicago Daily News Foreign Service)

OPEN DOOR, Argentina, May 27—"I went to school with Eisenhower. MacArthur showed me how to operate a tank. Nixon is my brother - in - law. Ridgway? He fought with me in Korea. Yes—we drove to Tokyo together—."

These are the ramblings of the man who runs the printing plant in a unique city.

Unknown to almost all foreigners and even to most Argentines it lies roughly 100 miles south of Buenos Aires stretching over 1200 acres. It got its name from Dr. Domingo Cabred who envisioned it 57 years ago.

Its nearly 4000 inhabitants run all of its facilities though they are all incurable mental patients.

'Open Door Treatment'

They work and live in complete freedom and without any guards, though many of them handle the most dangerous instruments day in and day out. None can talk coherently, yet all perform duties and produce work and goods unequaled by many normal humans. On week ends many attend movies in nearby cities. They always return and resume their lives under the supervision of Dr. Oscar D'Amato and his four medical assistants, all of whom believe and practice Cabred's principal formula: Mental illness needs the "open door" treatment.

Instead of dungeons and jail-like confinement, Cabred envisioned an open, unfenced, unguarded terrain where freedom and productivity would be the only medicine.

Dr. D'Amato takes child-like joy in pointing to corn fields, cultivated by mental patients, carpentry shops, run by mental patients, chicken farms, run by mental patients, gardens, planted by mental patients—orderly, promptly, silently efficiently and without a single accident or argument.

Work with Precision

We drove on to the tile factory, to the shoe plant, to a pottery shop, to a broom factory, to the dairy, to hothouses, to a shop producing pots and pans.

The scene never changed: They worked with precision and they talked incoherently. They gave clear and concise orders to their subordinate copatients yet conversed with the visitor in unclear, mystifying language.

D'Amato and Dr. Raul Carrea, a neuro-surgeon who supervises the nation's mental health program, are convinced that Cabred, in 1900, had the right idea. From what we saw they are right.

Mental Health Study Project At Prairie View

Daily World Atlanta Ga. Thurs. 1-17-57

PRAIRIE VIEW, Texas — Research activities in connection with a comprehensive mental health study moved into full swing at Prairie View A & M College this week as a committee of nine faculty members buried themselves into a mass of data concerning the high school youth of Texas.

Gathered by public school and college personnel over the state under the supervision of the Texas Education Agency and the Hogg Foundation, University of Texas, the data, now reduced to cards, include socio-economic factors and information concerning the interest, attitudes, concerns and problems in personal and family living. The long-range state project is called the "Cooperative Youth Study," crediting the large number of agencies and individuals who have worked in the project.

The Prairie View Committee has set as its purpose to determine the extent of the relationship between certain aspects of personal and social adjustment as measured by the special instruments of CYS and selected socio-biographic characteristics of approximately 2,000 Negro youth in Texas. The group will also attempt to compare the many factors associated with the Negro population against the entire population used in the study.

It is assumed by the committee that due to many social an deconomic factors, the Negro high school youth may have, many more pressing problems of social and personal adjustment. Statistical analysis of the data will reveal this information and to some degree point to specific needs. In many cases the "why concerning many attitudes may require further study.

Research associates, David Proctor and Edward C. Moseley, with the Cooperative Youth Study, Austin, are working with the committee in statistical analysis of the data.

A state-wide committee for Community Research in mental health is concerned with the immediate results of the Prairie View study in order to launch further investigation and programs aimed at improving services to the Negro youth of Texas. Composed of representatives from Negro colleges and agencies, the mental health group hold its organizational meeting at Prairie View in December and set forth a tentative program of action. The visiting group included Dr. John Ward and Mrs. L. V. Madlock, Texas College; Dr. William A. McMillan, Wiley College; Dr. W. M. Collins, Huston-Tillotson College; W. D. Thompson, Jarvis Christian College; H. C. Kenyon, Principal, Corpus Christi; Mrs. Jimmie Ruth Phillip, State P-TA, Prairie View; Leon Morgan, Texas Principals' Association; Arthur L. Livingston, Boy Scouts of America; W. S. Scott, YMCA Secretary, Tyler; and W. E. Hogan, YMCA area Secretary, Dallas.

Other over the state cooperating in the program include Mrs. W. L. D. Glass, Tyler, Texas and Mrs. Ruth M. Payne, Navasota, both area supervisors in Home and Family Life Education and Leslie J. White, Executive Secretary, Teachers State Association of Texas.

The data now being examined by the Prairie View committee will be presented during the annual Conference on Education, scheduled for March 1. Representatives of cooperating institutions and agencies will serve as resource leaders durhg group-work sessions also planned for the March date.

Griffin To Urge Aid for Deficient Negro Children

Constitution Tues. 1-8-57 Atlanta Ga.

Gov. Griffin plans to recommend that the Legislature build a home for mentally defective Negro children.

The state now has no such facility for Negroes although it does for whites. Griffin said the state intends to give the same consideration to mentally deficient Negro children that it does to whites.

The governor said he did not know what such an institution would cost. He said actual construction would depend on when the state has money to finance it.

The Story Behind the News

A New Approach in Fight Against Mental Disease

Inquirer p. 3

By JOSEPH F. NOLAN

IT WAS a minor news item in The Inquirer of Jan. 16, one of many that pour into the newsroom every day. It told of Richard Stein, 27, of 2738 Helen st., barricading himself in his home for 90 minutes and keeping neighbors and police at bay until he was calmed by a priest and led to a waiting automobile.

Seated in the car at the curb and witness to the turbulent scene was Dr. John N. Rosen, recently appointed associate professor of psychiatry at Temple University Medical Center. Philadelphia, Pa.

Behind the news item was an interesting story of a new approach in combating mental illness and of Dr. Rosen's share in it, for he was in the car at the curb not as a matter of happenstance. Jan. 21-57

Dr. Rosen already knew Stein well. Their relationship had grown from an experiment, with an entirely new concept in psychiatric treatment which "talks" the schizophrenic patient out of his mental ailment.

Dr. Rosen took charge of Temple University's Institute of Direct Analysis only a short time ago. Stein had been the first patient, chosen from among the inmates of a State institution by a special committee.

The new treatment, with Stein the sole recipient, had brought about such a marked improvement that the man was permitted to go home for a week-end visit.

But something in his home surroundings disturbed Stein and brought the outburst which frightened his family and neighbors and led to a quick call to police, to the Rev. William T. McBride, assistant pastor of the Church of the Visitation, B st. and Lehigh ave.—and to Dr. Rosen.

Quieted by Father McBride and led to Dr. Rosen's car, Stein was whisked to the Philadelphia State Hospital at Byberry and soon thereafter to Temple University's Institute.

Since then he has been reported "doing fine."

* * *

WHAT of Dr. Rosen's new "concept" and how does it work?

In brief, it is a matter of attempting to destroy a sufferer's delusions.

One step is to gain the confidence of the patient through a friendly and parental relationship in friendly surroundings.

Another is by constant questioning to create a growing doubt in the patient's mind about the man's delusions.

This is called a psychological assault against the delusion. For example, a patient who believes himself a great historical figure, is confronted with other psychotics with similar delusions.

When the patient begins to discard his own delusions he is beginning to make progress toward a return to reality.

Dr. Rosen calls this the direct analysis approach for the relief of acute mental illness. In ordinary laymen's language it might be called putting "reverse English" on the patient.

* * *

THIS is how Dr. Rosen explains it:

"The direct analysis concept is a technique based on Freudian psychology. The patient is accepted for treatment and the therapists attempt to understand what factors influenced his delusions."

Dr. Rosen describes the program as a sustained revolutionary psychiatric program conducted in a controlled environment.

The set-up calls for a staff of two fully qualified psychiatrists, several psychologists and Dr. Rosen.

The Institute is located in a three-story house near Temple University Hospital and the entire staff is "devoted" to the care and treatment on a research basis of a single patient—in this instance Stein.

Dr. Rosen said it has been his experience, after 12 years in New York, that patients treated in the direct analysis manner usually revert to their normal status in three to six weeks, whereas if they were placed in a mental hospital they would probably never get well.

They are seen periodically by the unit's staff members for long periods after their discharge from the unit on an out-patient basis.

* * *

DISCUSSING past methods of treating the mentally ill, Dr. Rosen, a stocky, dynamic man with broad shoulders and plenty of convictions, said "shock treatment, surgery of the brain (known as lobotomy), drug therapies and types of psychiatric hospital care, have had no efficiency tests other than the opinion of their proponents." He said the new technique being used at Temple University would be open and its methods would be subject to direct observation of qualified psychiatrists and psychologists.

The patients are selected by an impartial committee made up of Dr. Irving Lorge, dean of Columbia University Teachers College, New York; Dr. Kenneth E. Appel, of the University of Pennsylvania Medical School, and Dr. Robert Bookhammer, of this city, psychoanalyst.

This committee selects five comparable cases as nearly alike as humanly possible. They then select one case after careful diagnosis and accept him for treatment at the unit. The four other cases are treated by the usual type of therapy. In this manner a comparison can be made on results.

Dr. Rosen said in his experience with the new technique "there has never been a patient treated in this way—not damaged previously by customary methods of treatment—where we have been unable to reverse the psychotic illness."

Dr. Rosen agreed this was a powerful statement but insisted he was willing to support his claims with demonstrated results.

He said the revolutionary results are possible because of the long, concentrated treatment the single patient receives during which he is "talked out of his psychosis."

He said in most institutions the patient is seen by the psychiatrist only once a week or once a month, as compared to some sessions in his unit where he sits with the psychiatrist or his associates 10 to 12 hours at a time.

A tape recording is made of the conversations. The doctor is encouraged when the patient is well enough to object to the "talk." He said "none of our patients wind up anywhere but back in society after our treatment."

* * *

DR. ROSEN said before coming to Temple he had 25 patients in New York who were brought to his unit before other treatment, and the psychotic illness was reversed, and "not one of these patients became institutionalized."

He emphasized, however, that this type of treatment will not cure the present cases in mental hospitals, but it might make it unnecessary for them to go to such an institution.

"What is the use of spending millions of dollars on new hospitals when more psychiatrists should be trained to use this direct analysis and concentrated treatment?" Dr. Rosen asked.

Dr. Rosen said his department at Temple hopes eventually to set up additional units in other areas near the hospital, so that no new patients wind up with an insane outbreak.

He condemned the so-called brain operation which isolates part of the organ by injecting a needle into the brain, and holds that "shock treatment cures nobody."

He said the workers of his unit must be "dedicated," and must learn to treat the patient with warmth and devotion to duty and understanding.

The project at Temple Medical Center had a pledge of $150,000 over a three-year period fro[illegible] Rocke[illegible] Fund to establish the Institute, which comes directly under Dr. O. Spurgeon English, head of the Department of Psychiatry at Temple Medical School and Hospital.

Recently Dr. William N. Parkinson, vice president of Temple University and Dean of the Medical School, said one of the most important phases of the new plan is the training of qualified therapists in connection with treatment and research efforts.

Each year the Institute will train 30 psychiatrists

and an equal number of talented, non-medical personnel as assistant therapists in the direct analysis technique. The training will cover six months.



DR. JOHN N. ROSEN

Dr. John N. Rosen was born in 1902 in Brooklyn, N. Y. He was graduated from Syracuse University and received his degree of doctor of medicine from George Washington University College of Medicine in Washington in 1927.

Dr. Rosen interned at Cumberland Hospital and Jewish Hospital, both in Brooklyn. He served residencies in Brooklyn State Hospital and studied psychiatry in the New York Psychiatric Institute and Hospital, New York City.

He became assistant physician in the out-patient department of Jewish Hospital, and remained there from 1935 to 1940. Later he became a psychiatrist on the staff of Mt. Sinai Hospital, New York.

Dr. Rosen is the author of a number of medical technical papers and a book on "Direct Analysis." published in 1952 by Greene & Stratton.

He is married and lives with his wife, Hazel, in Gardenville, Bucks county, Pa., and has three children, Richard, a medical doctor now serving in the U. S. Navy, John, and Alice.

Dr. Rosen is a member of the American Psychosomatic Society, the American Psychiatric Association and the American Medical Association.

ATLANTANS LEAVE FOR MENTAL HEALTH MEET

Daily Herald, Atlanta, Ga., Tues. 3-26-57

WAGONER, Okla. — Ten Atlantans will attend the Southwide conference on nursing personnel in mental health programs, March 26-29 in Sequoyah State Park near here.

The conference, which is sponsored by the Southern Regional Education Board under its regional program in mental health training and research, will examine ways to increase the supply of psychiatric nurses in the mental health programs of Southern states and ways to make better use of those now working in such programs.

Dr. Wilfred Bloomberg, SREB associate director for mental health, said that "at least five times the number of psychiatric nurses is needed right now in order to staff programs under their present organization."

About 85 persons from 16 Southern states are expected to attend the conference. Included are members of the Southern Regional Council on mental health training and research which helps guide the SREB program.

Besides Dr. Bloomberg, the following persons from the Atlanta area are expected to be at the Oklahoma meeting: Miss Florence A. Beasley, consultant nurse, State Department of Public Health; Miss Kathryn M. Fritz, mental health nursing consultant for the U. S. Public Health Service, Region IV; Dr. Guy V. Rice, director, Health Conservation Services of the State Department of Health; Whitney Young, Jr., Dean of School of Social Work, Atlanta University; and Dr. John E. Ivey, director, SREB; Dr. William P. Hurder, assistant director of the mental health program; Mrs. Mary Howard Smith, mental health associate and Sebastian Sommer, assistant to the director, SREB.

Keynote speaker for the conference will be Dr. Otto von Mering, anthropologist on the staff of the University of Pittsburgh's Medical School. He will address the group on the changing attitudes of the public, professional persons, and hospital administrators toward the length of time patients spend in mental institutions.

Director of the conference is Dr. Hildegard Peplau, the SREB's consultant on psychiatric nursing. Dr. Peplau is director of the program in Advanced Psychiatric Nursing, Rutgers University School of Nursing.

Mental Health Chapter Organized Here

Fairhope Courier, Fairhope, Ala., Thurs. 2-21-57

The Alabama Association for Mental Health has established a local chapter known as the Baldwin County Mental Health Association for the purpose of putting the need for interest the mental health program before the public.

At this organizational meeting John Huffman was elected President, W. R. Stuart, Vice President and Richard Teamer, Secretary and Treasurer. At this first meeting the attendance was representative of the entire county and those present had an opportunity to view a sound picture showing the need and reasons for a mental health program. After the picture, Mr. Howard N. McManaway of Mobile delivered a most interesting talk in which he explained the program of the Alabama Association, its aims and the reason for establishing local units throughout the state.

The Association has agreed to come under the United Fund and therefore it is not necessary to have a drive, however, the prime reason of the Association is to get the needed for mental health facilities as well as doctors, nurses and psychiatrist before the public so that they will give more freely. renders assistance to those need

In addition to the educational program, the local Association denders assistance to those needing treament and also rehabilitation to those discharged from mental hospitals.

When one considers that over 9½ million people are today suffering from mental disorders and there is available at present about one doctor for every 4,800 patients, the need for assistance is very obvious.

Plans have been laid for a county wide meeting to be held in the immediate future at which time material and information concerning the project will be given out to key persons with a request that an educational program be started in Baldwin County.

Mrs. Della Stapleton, President of the American Legion Auxiliary officially represented the Legion and Auxiliary and pledged their support to the program. It is hoped that other organizations will join this wonderful cause and lend their assistance and help present the needs and problems to the general public.

$90,000 GOAL IS SET FOR MENTAL HEALTH

Commercial Appeal, Sat. 3-30-57

Mississippi Drive Will Be Held April 29-May 4

Memphis, Tenn.

From The Commercial Appeal Jackson, Miss., Bureau

JACKSON, Miss., March 29.—A $90,000 goal has been set for the campaign of the Mississippi Association for Mental Health to be conducted April 29-May 4 in connection with National Mental Health Week.

The quota was announced Friday by State Senator Hayden Campbell of Jackson, state fund chairman. He has just held meetings with district and county workers in Clarksdale, Jackson, Laurel and Tupelo.

"We feel that our goal is modest in face of the fact that the problem of mental illness is greater than all of the problems that have been attacked in the field of public health to date," Senator Campbell said.

The contributions will be used for research, training personnel in psychiatric and allied fields, volunteer services to mental hospital patients, establishment of psychiatric clinics and rehabilitation of recovered patients.

District chairmen are the Rev. Russell Nunan of Greenville, Erst Long of Ripley, Tom Crockett of Jackson, John Nosser of Natchez and Elmer Williams of Biloxi.

Bills for Mentally Retarded Ready

Herald Tribune, New York, N. Y., Mon. 1-28-57, p. 9

Special to the Herald Tribune

ALBANY, Jan. 27.—Six bills aimed at improving services for the mentally retarded will be introduced in the Legislature tomorrow by Assemblyman Frank S. Samansky, Brooklyn Democrat. They would amend the mental hygiene and education laws by providing that:

Each board of visitors for state schools for the mentally retarded shall include one parent of such a child; the "poor and indigent" requirements for admission to such schools be eliminated and "training and education" be added, with such education equal to that which children would have in their own communities.

All new institutions for the mentally retarded would be limited to a maximum capacity of 1,500 inmates.

The bills also propose that there should be a $480 annual pay differential for teachers of the handicapped and that the Mental Hygiene Commissioner be empowered to choose state school directors who are trained in discipline as well as in medicine.

MENTAL ILLS TIED TO CITY'S GROWTH

New York Times 4-8-57

Dr. Lemkau, Retiring Head of Community Agency, Sums Up Two-Year Diagnosis

Mon 3-4-57

By EMMA HARRISON

New York's mental health problems are part of the city's growing pains, the director of the Community Mental Health Board said last week.

He is Dr. Paul V. Lemkau, and he made the diagnosis as he rounded out his two-year term in his post. He will return to Johns Hopkins University as a Professor of Public Health at the end of the month.

"The city's worse than the country in most things," he said, consolingly, at his desk at 93 Worth Street, the other day. "Except in intelligence, I suppose that New York, being the biggest city, is as bad off as anybody."

"There are various groups that inevitably rub each other in the process of becoming population," the psychiatrist said. "The youth of some communities are a problem to us because some communities, such as Queens, have grown so rapidly without the establishment of settlement houses and case-work agencies.

"They grow out of the short pants of the multiple towns, but not into the long pants of the city," Dr. Lemkau said.

Discussing the Community Mental Health Board, which he has nurtured for the past two years, he said:

"It is the first full-blown attempt to relate services for psychiatric patients to the social setting in which they live."

This is a reversal of the pattern that occurred in the eighteenth century when the patients became the responsibility of the state, he explained.

It is the aim of the board, he continued, to bring services down to the unit where they can be understood in the community—an attempt to "spread services where the whole community can get at them."

Board's Budget Up

Dr. Lemkau, who can be statistical as well as philosophical about the board's activities, pointed out in his report that the second year's budget exceeded the first by 22 per cent. It reached $15,848,926.

Service by municipal and voluntary agencies in the program was given to 44,500 persons during the year, the report said. There was a renewal of twenty-six contracts with voluntary agencies and an addition of twenty contracts. About one-third of all beds for psychiatric patients in voluntary general hospitals were subsidized, a total of 22,230 patient-days.

It was estimated "conservatively" in the report that 600 agencies of all types in the city could profit from mental health consultation services in connection with their non-psychiatric programs. Dr. Lemkau bracketed in this category recreation agencies, settlement, family service agencies, employment, rehabilitation and health services, programs for youth and for the aged.

And beyond statistics and achievement lies an adequate challenge for his successor, Dr. Lemkau adds. He thinks that the things that remain to be done are the exciting ones, that the administrative details have been fairly well defined by now.

Views on Education

One is the matter of public education. Dr. Lemkau is not quite sure just "what the public should know." He thinks that possibly it should know just what it needs to know," and that the approach should be through special groups and their needs.

He said that present organization of the courts had made comprehensive and effectual psychiatric programs difficult. At the moment he sees this as a court organization problem. When that has been done the establishment of proper psychiatric services can proceed.

The "problem family" presents another challenge to a community mental health program. Dr. Lemkau wants to know if concentration on the multiple-problem family could increase the efficacy of the services. Rehabilitation is another undeveloped area where services are scattered, overlapping and more often nonexistent, he said.

Dr. Lemkau, who has spent his two-year residence in the city in a house on Staten Island with his wife Ruth and their five children, plans to return to Baltimore soon in his home-built sailboat.

SCHOOL CITES AID TO MENTALLY ILL

Times 2-17-57 Sun 2-17-57

Linden Hill Reports on How Badly Disturbed Children Respond to Treatment

New York

By EMMA HARRISON

Special to The New York Times.

HAWTHORNE, N. Y., Feb. 16—How seriously disturbed children formerly considered untreatable outside of a mental hospital have responded to treatment in the homelike atmosphere of Linden Hill School was described here this week.

The school of the Jewish Board of Guardians observed the beginning of its fourth year by reviewing its progress for mental health and welfare leaders attending Lincoln Day exercises.

School personnel dramatized the accomplishment by presenting a full case history of one seriously disturbed adolescent girl who may soon be able to leave the school.

At the same time the school was advised by a psychologist to devote itself as a research center where methods of treatment might be evaluated.

Dr. Joseph Zubin, a biometrics research scientist for the New York State Department of Mental Hygiene and Professor of Psychology at Columbia University, urged that the school not become merely a treatment center. He said it should devote itself to determining what kind of service was needed and to whom it should be given.

"For this purpose," he said, "not only are newer and better treatments needed, but you also need to establish baselines by evaluating the child at the moment he enters the institution and at the time he leaves, or at some predetermined follow-up period if he becomes a long-term resident."

Follow-Up Studies Urged

"One of the most shocking aspects of research in the mental-illness field," Dr. Zubin said, "is the complete absence of follow-up studies on people who are released from treatment."

Next to nothing is known of patients following their release from mental hospitals, he explained. He advised that a five-year follow-up of the child be carried on after his release from residential treatment.

Herschel Alt, executive director of the Jewish Board of Guardians, who reported on the school's first three years, said that only 10 per cent of the children referred to the school during that period could be accepted. Of the forty accepted in that time, fifteen have been discharged and the rest remain under treatment.

He said that while the program was too new to predict the success of the first patients, the school felt it was "on the right track."

It is believed that the major proportion of the forty children already treated in the program would be able to return to the community, he added.

Mrs. Albert J. Erdmann, chairman of the school's management committee, said that its greatest need at the present was an extension of care and treatment for those children who were not yet ready to live in the community without some protection.

CLINIC BROADENS MENTAL AID BASE

Times 2-3-57 New York

Low-Cost Psychoanalysis Is Offered Here and Meets With Quick Response

Sun 3-3-57

By EMMA HARRISON

A pioneering psychiatric clinic in midtown has established an economic formula for providing free and low-cost psychoanalytic treatment: It operates a $250,000 program on a $60,000 budget.

Before the Karen Horney Clinic opened at 115 East Thirty-first Street in May, 1955, its premise that free and low-cost treatment was lacking in the city was confirmed. Five hundred people appeared in person to apply before the clinic opened. During the first twenty-one months, 10,789 people applied by phone, letter or in person.

At the clinic, which operates on a low budget because its doctors volunteer their services, the emphasis is on friendliness and informality. The doctors are associated with the American Institute for Psychoanalysis.

"No hospital atmosphere, no ether smell," said Dr. Paul Lussheimer, the medical director, as he stood in the small reception room of the four-story clinic building recently. He sniffed appreciatively.

Inside the open office door was the constant pot of hot coffee and a heap of cookies and cakes. These are the consultation fees for the physicians who rush in amid their own office schedules to meet a total of 150 hours weekly with their clinic patients.

This is one clinic where psychoanalysis begins at home. Or, as Dr. Lushheimer explains, with The Letter. All applicants for treatment, whether referred by a social agency or acting on their own initiative, must write a letter describing their problems and the reasons for seeking help.

"For many, it is the first time they have ever put it down and looked at their problems," said Herman Rikelman, executive director.

First screening of letters is done by psychiatric social worker, Mrs. Natalie Goldart. She determines the facts about prospective patients whom she then interviews at the clinic. Family situations, past medical and sociological histories and financial qualifications are some of the facts she seeks.

She decides if the applicant's income is low enough to qualify for treatment at the clinic, where $6.50 is the maximum charge for a psychoanalytic session. Income limits depend on the size of the family and other obligations; 70 per cent of patients earn less than $75 a week.

Patients who qualify meet with a team of doctors. They determine by a kind of "fingertip sensation" if the patient is right, according to Dr. Louis R. Hott, assistant to the medical director. The team decides what type of therapy will best suit him.

Dr. Hott then undertakes the intricate task of fitting the patient to the personality and schedule of one of the sixty available physicians. All therapy is done by medical doctors.

Although the program is young, Dr. Lussheimer and his staff have several clear-cut objectives in mind. All of them add up to an expansion of research and treatment. The first is particularly appropriate because the clinic is the first to operate exclusively on the principles of the late Dr. Karen Horney, Dr. Lussheimer said. The second is essential because only 500 of the 10,789 have been served; the capacity is currently 100 in treatment and twenty to be assigned.

MENTAL CARE RATE REPORTED UP IN 1956

Tribune P. 1 Thurs. 2-7-57 Chicago, Ill.

Hospital Discharges Show Increase

New York, Feb. 6 [Special]—The first nation-wide decrease in state mental hospital patients occurred last year, the National Mental Health committee has reported. The decline was attributed to intensive therapy.

The number of state mental hospital patients in 1956 was about 7,000 under the 1955 count. The committee noted that the decrease was even more remarkable since 1956 also was a record year for admissions.

A total of 186,000 persons was admitted last year, compared with 178,000 in 1955 and 115,000 in 1945, when statistics on state mental hospital populations were first collected on a national scale.

Queried on Programs

On the basis of these figures, obtained from a report published by the Interstate Clearing House on Mental Health of the Council of State Governments, the committee queried all the states on how new appropriations were being used for patient care and how future funds could best be used.

Most states reported agreement on the need for a balanced treatment program, the council found. The following areas of agreement also emerged in answers to the questionnaires:

1. Patients are now being treated rather than just maintained.

2. Impact of the so-called

tranquilizer drugs has created the need for more medical personnel and recreational and occupational facilities.

3. Research has to be accelerated.

4. Children's and out-patient units must be increased.

Credit Added Funds

Reflecting on "what turned the tide" in the mental hospital population, the committee summary found that one answer lay in increased yearly appropriations by state legislatures, with the cumulative effect finally reversing the "seemingly inevitable rise."

It noted that, in 1945, average daily expenditure on each mental patient was $1.06. In 1956, it rose to $3.26. The committee considered this a good increase, despite higher living costs. It also observed that this figure was low as compared with the veterans' administration's 1955 expenditure of $8.99.

Whereas in 1945 there was one full-time employe for every 6.8 patients, last year the ratio fell to one for every 3.6 patients. Increases in trained psychiatric personnel found 3,659 superintendents and physicians in state hospitals in 1956, compared with 1,458 in 1945.

Personnel Shows Hike

Even more dramatic increases were shown in other professional personnel. Psychologists and psychometrists increased 574 per cent; social and field workers, 221 per cent; graduate nurses, 153 per cent, and other nurses and attendants, 133 per cent.

Improvement in the discharge rate also was reported. It increased from 123 patients for each 1,000 in 1945 to 175 for each 1,000 in 1954.

10,000,000 People Mentally Ill, Emotionally Disturbed

World Wed. 4-24-57
Birmingham, Ala. P. 7

BY MILDRED V. FENDER

The tide of social ills in our society reaches a new height at each measurement.

Now 10,000,000 people mentally ill and emotionally disturbed; now millions of children victims of broken homes; now young people—more than a million—before our courts each year. These are but a few of the symptoms of the illness of our society. This is now. Today.

The cost can be measured in the millions of dollars but remains immeasurable in terms of hurting Hurting people and hurting the community whose spirit we so proudly hail.

The tide is rising again today. To morrow it will rise some more. The next day the same.

Can this tide of social ills be stemmed? Are these problems inescaple and to be dealt with only as symptoms by technicians in the helping arts? Much is being done in many ways to deal with these symptoms. But this is not enough. No one can foresee the high tide point and those who are best qualified to speak say that job is too big for the number of psychiatrists, psychologists social workers and all of the other specialists concerned with the needs of the people.

Our community must not be satisfied that for the most part the work being done consists of work with people after the social problems arise.

We believe that the best answer to these overwhelming problems can be found in prevention.

The American Social Hygiene Association has a point of view in this and we like it.

They do not believe that there is a single cause basic to our social ills nor do they believe that any single organization or discipline can be the preventive force so dramatically needed.

They do believe, with many others, that the early years- Life In Family Life-have a tremendous bearing on the social health of our people.

They believe, too that the community does or does not furnish an environment for the sound development of family living; therefore, the community can have a tremendous effect puon the ways in which children gro wand develop.

The American Social Hviene Assocation is therefore committed to a continuance of its program for furthering Education for Personal and Family Living - through the schools and other institutions, groups and agencies who want and need help in developing such a program of education. All of the disciplines working together.

The American Social Hygiene Asocation is also committed to a program of service to communities through existing agencies, designed to assist in making communities more socially healthy for people. All of them.

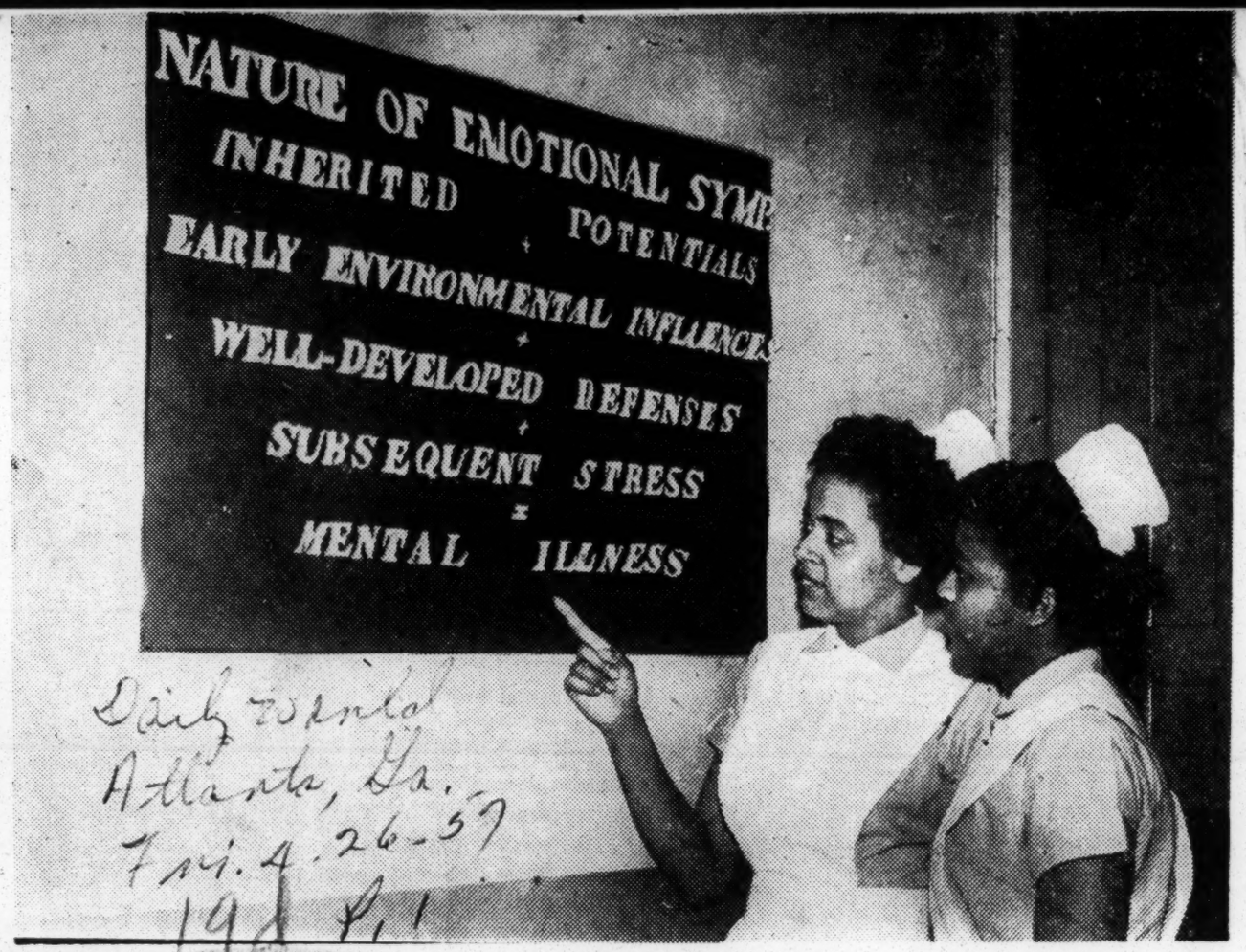
Wed. 4-24-57

Your local Social Hygiene Association is doing an educational job in this area within Jefferson County.

P. 6

For further information, Literature or program on VD, contact your

SOCIAL HYGIENE AND MENTAL HEALTH ASSOCATION
1912 - 8th AVENUE, SOUTH
BIRMINGHAM, ALABAMA
TELEPHONE 54-9571, ex. 223 or 226



Daily Journal
Atlanta, Ga.
Fri. 4-26-57
19 P. 1

VIEW MENTAL HEALTH EXHIBIT — Misses Mertis Camp and Daisy Chavers, student Nurses at Grady Hospital, view one of two Bulletin boards designed to give insight on the problems of mental health, and also to bring to the attention of the public the lack of adequate facilities for the proper care of mental patients. The student body at the school has launched a program for orientating the public on this problem during Mental Health Week, April 25 through May 5. This project is being co-sponsored by the Georgia League of Nursing and The Atlanta Association for Mental Health. — (Perry's Photo)

MENTAL ILLNESS 'TREND STOPPED'

First Decrease
More are Admitted, But Patient Days Fewer

New Orleans, La.

Mental illness is apparently on the downgrade in the United States, according to information released the national committee on mental health through the Louisiana Association for Mental Health.

Sun. 1-27-57

Coryell McKinney, president of the association, said statistics gathered by the committee show that for the first time in history a year passed in which there were fewer persons per day in mental hospitals than during the previous year.

P. 11

In 1956, this was true in 34 states. Louisiana had the same number, which indicates a trend has been stopped, McKinney said.

But more and more persons are being admitted to the mental hospitals, he added.

Dr. Loyd W. Rowland, director of the association, said: "With more persons admitted but with fewer patient days, you can make your own easy interpretation — it means a shorter stay per patient.

"Why the shorter stay? Well, because throughout the US the quality of services in the mental hospitals is improving. We have more of everything—more doctors who are properly trained, better attendants and more of them, more and better trained clinical pathologists, social workers and other mental health specialists. Furthermore, we are spending more money on the hospitals."

McKinney said that for the "first time, it appears that the mentally ill are beginning to get the treatment they need and they are responding to it."

19d 1957

MENTAL

Team Effort Is New Weapon Against Mental Illness

Herald, Sat. 5-18-57 B'ham, Ala. P.1

BY EDWIN DIAMOND
(INS-SCIENCE WRITER)

CHICAGO--(INS)--Team effort by ministers and psychiatrists is proving to be a new and valued weapon in America's war on mental illness.

This team cooperation is replacing the former hostility between religion and psychiatriy, a group of chaplains and doctors told the annul meeting of the American psychiatric Association in Chicago today.

DISTURBED PERSONS

The minister supplies spiritual understanding and the psychiatrist brings his scientific experience to the aid of the disturbed person. Rallying of Spiritual and Psychiatric forces is taking place against the background of a recent survey indicating as many as one in every 10 supposedly normal persons has some form of mental disability.

The survey was conducted in Baltimore, Md., by the Commission on Chronic illness, a private research group. The figure does not include some 700,000 Psychiatric patients in the nation's hospitals.

The following examples were cited as evidence of the need and valu of ministr-psychiatrist cooperation:

1. A survey in Phoenix, Arizona showed 40 per cent of the persons questioned would turn to their value of minister-psychiatrist cooptional problems.

COUNSELING CENTER

2 A Non-Sectarian Counseling Center, established by the Metropolitan Federation of Churches of St. Louis and Psychiatrists, is helping hundreds of persons with problems. In the first 200 cases seen, 32 of the persons involved were referred for psychiatric treatment according to Dr. Robert B. Deitchman of Washington University, St. Louis.

3. Pastrol Counseling Center sponsored by the Greater Worchester, Mass., area council of churches has recently opened. Dr. E. Adams Daneman and the Rev. John I. Smith reported plans to expand Psychiatric training of practicing protestant Parish Ministers.

4 The Interfaith Association of Mental Hospital chaplains now has a membership of 215 according to the Rev. Ernest E. Bruder of St. Elizabeth Hospital, Washington, D. C.

Stanley and Mental Health

Post-Times Herald Wash. D.C. 5-30-57

It seems to me that in the forthcoming campaign for Governor in Virginia one of the main issues is going to be integration.

Perhaps that will be a good issue since Governor Stanley is trying to wreck the public school system in the same way he has already wrecked the mental hospital system.

Those who know of existing conditions in the mental institutions feel that the main issue for consideration by the candidate should be the unfortunate people in these institutions.

Progress comes slowly in mental hospitals, but in the past few years we did progress. Patients were getting better clothing, food, proper drugs, and the personnel.

Since Governor Stanley has brought into the mental hospital system a bunch of handpicked persons from other states to carry out his wrecking order, all progress made in past years has been torn asunder.

He has fired members of the hospital board who refused to bow to his pressure, replaced them with "yes" men, split the "system" in two, hiring high-salaried personnel to head each section, who are figureheads to carry out orders that come from the Governor's office.

Since this change has come about the employes of the mental hospitals have been robbed of a big portion of the small salary they were earning. It was understood that uniforms, laundry, medical care and meals at a nominal cost were part of the wages that the employes agreed to accept.

Now Governor Stanley has ordered the discontinuance of laundry service and medical care, and the food must be cash on the barrel at high prices.

To fool the public it was announced that a raise had been given to take care of the things taken away. This so-called raise amounted to about $6 per month, whereas it costs around $2.50 per week to launder white uniforms. Thus the laundry consumes all the raise.

All of this has lowered the morale of employes to the point of despair. They no longer have any incentive to work, yet they are still doing the best for their patients under these conditions. In the long run the patients are sure to suffer.

At present plans are under way to unionize the hospitals, of which I do not approve, but the time has come that fire must be fought with fire.

The present administration has nothing but contempt for those who are doing their best to make an honest living and at the same time take care of the mentally ill. Will you let these people destroy the progress that has been made over the past years and place in jeopardy those you love?

IRATE VIRGINIAN.
Staunton, Va.

Tranquilizing Pills Help Calm Violently Insane

Herald 5/10/57 Miami, Fla.

BY ARTHUR J. SNIDER
Miami Herald-Chicago News Wire

CHICAGO — Tranquilizing pills for mental illness are costing the Illinois Welfare Department $1,300,000 a year, but the state is beginning to profit from the investment.



SNIDER

The story is best told by citing events in Hawley Cottage, the housing ward for violently disturbed women at Elgin State Hospital, Elgin, Ill.

For many years, patients there have been so combative and destructive that plumbers, glaziers and carpenters have been hard-pressed to keep pace with the need for repairs.

They have had to unclog sewers and toilets, and repair screens, furniture and windows.

Mem. 1-7-57

Last April, the hospital's chief engineer reported to the superintendent that for some reason, repair work at Hawley Cottage had fallen off considerably.

He was not aware the calm-down drugs, chlorpromazine and reserpine, had been added to the psychiatric treatment.

Dr. Werner Tuteur, the hospital clinical director, compared three half-year periods to show how improved patient behavior has benefited the budget of Hawley Cottage.

During the first six months of 1954, it was necessary to spend $791.10 on wages to repair damage.

During the first six months of 1955, when use of the drugs first began, the cost dropped to $656.01.

During the first six months of 1956, repair costs were $290.50.

But more important than any cost, Dr. Tuteur points out in a paper accepted for publication by the Journal of the American Psychiatric Assn., is the benefit to the patient.

Seventy per cent in Hawley Cottage, once the "end of the line," have shown improvement.

Twenty-five of the 257 patients have been returned to their homes.

Interpret Language of Fellow Sufferers

Mental Patients Help Unlock Secrets of Mind

Herald P.1-b
Jan. 6-23-57
Miami Fla.

By BERT COLLIER
Herald Medical Writer

Mental patients at Jackson Memorial Hospital are helping doctors understand what goes on in the sick minds of other patients.

The strange ability of persons suffering from schizophrenia to explain the speech and action of other schizophrenics — which have no meaning for normal minds — could lead to revolutionary change in the treatment of these cases.

The discovery was made during research in this serious form of mental illness at Jackson's Psychiatric Institute.

"In our experience with a special group," said Dr. Maurice Greenhill, director of the Institute, "transfers of patients to the state hospitals has been cut 20 per cent. Use of seclusion for disturbed patients is down to a tenth of what it used to be. Destructive behavior has been reduced to a minimum."

Dr. Greenhill, who also heads the department of psychiatry of the University of Miami School of Medicine, said use of electric shock and drugs has been practically eliminated for this particular group of patients.

So far, Dr. Greenhill told a recent meeting of the Florida Medical Assn., the technique has been used only with a small group of patients. But if it were understood and practiced generally, he said, "it might be possible to open the locked doors of the schizophrenic wards and get these patients out into the open."

Schizophrenia is a serious form of mental illness. Its patients take up half the hospital beds. Effective treatment takes longer and the cause is hard to determine. It affects many children and psychiatrists believe one basic factor is family conflict.

The disease is a disorder of thinking and feeling and is marked by bizarre and illogical behavior and rapid deterioration.

Dr. Greenhill and his staff have been working to improve treatment methods. The most effective involves the help of patients in free association with each other and with institute personnel.

Schizophrenics generally withdraw from reality. They react to the immediacy of their surroundings and associations. Everything patients say and do become clues to their condition. Psychiatrists, psychologists, nurses and attendants watch, reporting their observations at staff meetings.

Patients themselves provide the most valuable clues. These come out best in the dramatic game of charades, when they act out their conflicts, hopes and dreams.

"Often the acting is very elaborate and apparently meaningless," said Dr. Greenhill. "But we have found that the schizophrenic seems to understand the most obscure behavior of another schizophrenic.

"The more acutely ill they are, the better they seem to understand."

MENTAL CURES EXCEED RATE OF NEW CASES

Daily Tribune
Thurs. 5-16-57
Chicago, Ill.

Norwich, Conn., May 15 [Special]—For the first time in its 53 years, a state mental hospital here is discharging more patients than it is admitting. This is largely the result of an $1,800,000 experiment that worked.

The project is the Russell rehabilitation center at the Norwich state hospital. The center, just a year old, has enabled the hospital to intensify its occupational therapy department.

Patients enrolled in the program do not weave pretty baskets, fashion gaudy knicknacks or produce hand painted flower vases. Instead, they mend shoes, paint and refinish furniture, repair and restore mattresses, operate printing presses, and even help run a canteen and beauty parlor.

Patients Play, Too

They play, too. There are billiard tables, shuffleboard, table tennis, and bowling. There are classes in fine and commercial arts, a photography laboratory for camera enthusiasts and a library with 4,500 books and the latest newspapers.

The activities take place in a sprawling, three story brick building named for Mrs. G. Gardner Russell of West Hartford. Mrs. Russell, a former trustee chairman, led the campaign for the necessary state funds. The building was opened in March, 1956.

Of the 3,000 patients, 1,700 participate weekly in the center's program. They come to work or play in an atmosphere calculated to avoid the traditional "institutional" aura.

Play Soft Music

It begins with soft music piped thruout the building from the hospital's radio room [run by patients]. It includes such touches as the yellow, blue, and orange pastel colors with which the walls are painted and the gaily tinted umbrellas that dot a huge open air patio near the canteen.

Volunteer women workers from Norwich and surrounding communities help the staff daily. No door to the building is locked and patients with ground privileges may come and go as they please.

Dr. Ronald H. Kettle, hospital superintendent, and Harry Kromer, director of occupational therapy, say the center's main achievement has been to provide hope for patients who otherwise would be resigned to "staring at the wall."

Aids Discharge Rate

Dr. Kettle does not underestimate the value of new medicinal techniques, but he says at Norwich, at least, occupational theryapy has contributed greatly to the rise in the discharge rate.

Kromer, who has headed the therapy department for 42 years, says there has not been a troublesome incident at the center—even among the more emotionally distrubed patients.

For Your Health's Sake:

A.P. - C.S. Mirs P. 9

What Is Mental Illness?

Sat. 6-15-57
Washington D.C.

By Dr. Morris Brand

MENTAL disorders fall into three classifications: the psychoses or insanities; the neuroses; and the personality disorders. The symptoms often represent an inadequate attempt at adjustment which often in turn produces added problems to the patient and to those about him.



The patient with a psychosis which may be of acute or chronic nature ordinarily requires intensive treatment in a hospital. Psychoses are generally characterized by severe mood disturbances, with serious changes in thought, feeling, or behavior; withdrawal from reality; or by persistent delusions and hallucinations.

The psychotic is unable to cope with the real world, substituting an unreal world of his own making and reacting to that world rather than to the actual world about him.

Patients with neuroses, or psychoneuroses as they are often named, have less severe emotional disturbances and are most often treated by psychiatrists in their offices or in clinics. Some neuroses are more disabling than others. Some are sufficiently severe to prevent the person from going to work or interfere with many other normal activities.

Neurotic disorders manifest themselves by various degrees of anxiety or a constant feeling of dread, indecision, distraction with symptoms of depression, repetitive acts and thoughts and phobias (fears). No matter how disabling the symptoms, the neurotic is able to recognize and identify the immediate environment—but he may not be able to deal with it properly and satisfactorily.

The third class of mental or emotional disturbances are the personality disorders. Persons so affected have difficulty in adjustments which sometimes manifest themselves in disturbed behavior such as alcoholism, delinquency and drug addiction. Other patients who have difficulties in handling their problems and working out satisfactory adaptations and solutions may develop symptoms which seem to be as a result of an illness of a part or parts of the body or may aggravate or exaggerate an actual existing medical condition.

In most instances, mental illnesses do not show any detectable changes in the brain structure. Factors contributing to mental illness include severe and prolonged stress and strain. Unfortunate experiences, especially during the formative years may cause immediate mental abnormalities or become the basis for serious emotional disorders in later years.

When the public understands that mental illness is an illness and the mentally ill need help just as much as does any other type of patient, then the mentally ill will be less neglected and they will have a greater chance of returning to a normal life.

HOW YOU CAN HELP THE

Mentally Retarded Child

There is no cure for the mentally retarded child. This is a difficult thing for parents to realize, but the sooner they do, the sooner they can help their child.

19d

Mental retardation means impaired or incomplete mental development. The child who is retarded is not able to learn as much as other children.

When he is able to learn, he learns much more slowly. He can't reason as well as the average child. He often uses poor judgment. It takes him longer to figure things out.

Mental retardation—like being nearsighted or hard of hearing—is a condition. It's not a disease and is not always obvious. It has to do with the way a person's brain works—or doesn't work—and how that person's mental ability compares with that of everybody else.

Just as people are of different physical sizes, so they have different mental abilities. Some persons are tall and some are short. Mentally, too, some are much less bright than the average.

* * *

MARY IS an example. As an infant she appeared well and healthy. But it took her much longer to sit up, stand and walk than it took other children.

Later, when she was 4 years old and still had the appearances, at first glance, an average 4-year-old child, Mary played and thought more or less like a 2-year-old.

At about 5 years old, when most children start school, Mary was just beginning to learn how to feed and dress herself. At high school age, she was just starting to recognize letters and words. She was still doing the kinds of things the average 7 or 8-year-old does.

FOR MOST of the mentally retarded, no cure is known. There is no way that we know of to replace brain cells that have been injured, destroyed or have not developed.

This fact is hard for most parents to accept. Before they accept it, many of them "shop" around a great deal. They exhaust themselves, their child, and their pocketbooks.

You can help your child more if you do accept the fact that there is no cure. Then you can make plans for him that are based on what he really is like instead of what you would like him to be.

* * *

IF YOU suspect that your child is not doing what other children of his age are doing, or if you feel he is slow, don't jump to conclusions. But, also, don't just sit back and wait for him to "out-grow" his trouble.

Take your questions and your doubt to your family doctor or the doctor at a clinic.

No one can predict exactly to what extent your child's intelligence will grow and develop. In fact, no close prediction can be made about any child.

A good psychological examination, however, may give you and those helping you an idea of what the prospects are and how you can start to plan for your child.

An excellent pamphlet on care of "The Child who is Mentally Retarded" may be secured from the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D.C. The price is 10 cents each; $7.50 per 100 copies.

Leaders Take Part In Planning On Mental Health

Daily World Sun 3-10-57
Atlanta, Ga. p1

PRAIRIE VIEW, Texas — Negro leaders from more than 150 Texas communities participated actively in discussion and planning ways of improving mental health of youth during the annual Conference on Education held Friday at Prairie View A. & M. College.

A research study dealing with the interests, attitudes and problems of Texas youth was the source of the conference topic. In addition to a presentation of findings of the study, there were interest group sessions held to explore the problems and a closing session which dealt with implementation and follow-up. Leaders from several collegs, universities and social agencies over the state served as consultants and resource persons for these special sessions.

Speakers for the general session program included Dr. Wayne H. Holtzman, Associate Director of Research, and Dr. Bernice Moore, Mental Health Consultant, both of the Hogg Foundation, University of Texas. Dr. William L. Cash, Jr., Director of the Counselling Center and Dr. George R. Razland, Jr., Head of the Department of Sociology, Prairie View A. & M. College presented the research study data and findings of the College Chairman, Dr. C. R. Woolfolk, reresenting the Research Committee, Rev. L. C. Phillip and Dr. W. R. Banks were participants on the general program.

Representatives of the Hogg Foundation spoke concerning the Cooperative Youth Study, a long-range research project sponsored jointly by the University of Texas, the Texas Education Agency and several other colleges and universities of the state. The purpose of the study is to get some notion of the relationship between socio-economic factors and certain kinds of mental problems such as interest, attitudes and concerns toward personal and family living. The data included about 10,000 statements of high school youth (grades 9-12) in about 14 4schools selected by random sampling.

A Prairie View Committee studied the data involving approximately 2,000 Negro youth in the state sample. Using information from the total study, the group described the several aspects of personal and magnitude of association among the social adjustment as measured by the CYS instruments; determined the extent to which Negro and white youth differed in their performance on the problem and attitude scales; and measured the association between certain aspects of personal and social adjustment and selected socio-biological characteristics of Negro youth.

Sun. 3-10-57

Social, economic and other community factors have a very great bearing on the interests, attitudes and concerns of Negro youth, the committee revealed. While the average Negro youth shows more of a tendency toward unwholesome personality traits than white Texas youth, it is evident that such attitudes expressed by him are really products of his environment.

p.4

The finding indicated that a pessimistic, self-centered and negative attitude regarding the understanding and acceptance of social customs and mores may be the result of an attitude growing out of peculiar position of the Negro in American society. His agreement with harsh and demanding methods of control and affectionless child rearing practices stems back to his own family problems and strict authoritarian discipline of which he has been the victim.

Examples of other findings are: (1) boys are more poorly adjusted than girls, (2) ninth graders were more poorly adjusted than 12th graders and (3) students in the larger schools were more poorly adjusted than those in the smaller schools. Many other detailed findings were discussed and are available in booklet form at the college.

Interest group sessions were developed along the areas of follow-up action by improving mental health through guidance and personal services, recreational and leisure time activities. Utilizing the strengths of family life and through community service. Representatives of several colleges and agencies committed their organizations to action programs in mental health education.

Medical School and Hospitals

News & Observer Raleigh, N.C Sun. 3-17-57 p. 3

Work for Better Mental Health



By PETE IVEY.

CHAPEL HILL—In only 10 years, the picture of mental health in North Carolina has improved to the extent that "half a century of progress" has been achieved in less than a decade.

If a doctor wanted to show a "before and after" view to illustrate improvement, there could be no better example than showing the condition of the state's mental hospitals a dozen years ago and then displaying the effective program existing today.

Improvement Began.

Improvement began with the acquisition by the state of Camp Butner, a U. S. Army installation near Durham, in 1945. The statewide "Good Health Program" which began in 1945 and the initial appropriation by the General Assembly in 1947 resulted in a building program which had the leadership of the State Hospitals Board of Control, which was headed at first by the late Dr. H. O. Lineberger, then by W. G. Clark and now by John W. Umstead. A key role in building better mental care facilities also was taken by Dr. David A. Young, superintendent of state hospitals.

The Department of Psychiatry in the School of Medicine at the University constitutes a relatively small but potentially important force which is spreading its beneficial influence all over the state, and this potential will increase.

Staffs Have Asked.

The medical staffs of the state's mental hospitals at Dix Hill, Camp Butner, Morganton, Goldsboro and Kinston have substantially contributed to the improvement in care of the mentally ill. Greater advances can be expected in the next decade.

Not solely a center of treatment-teaching-research activity in the University, the "services" of the University are extended to Dix Hill, to Morganton, to Goldsboro, to Camp Butner and to the Caswell Training School at Kinston.

How the School of Medicine, of the University including the Department of Psychiatry as well as other departments have concentrated their helpfulness in aid to the other state institutions for the mentally ill presents a bright picture of accomplishment.

In brief, here are instances of cooperation:

1. Some of the staff at each of the state's mental institutions have received at least a part of their training at the University.

2. Psychiatrists from UNC conduct weekly seminars for resident and staff psysicians at Dix Hill and Camp Butner.

3. Senior resident surgeons from North Carolina Memorial Hospital spend a fair portion of their time at these institutions working under the direction of senior part-time staff members.

4. The Department of Pathology at UNC Medical School is responsible for the important laboratory services participated in by staff, residents and medical students.

5. Resident physicians in the training for psychiatry at the University spend a part of their time in one or more of the state's mental institutions.

6. Research projects to find out how various kinds of treatment are affecting patients are being carried on at Dix Hill, Goldsboro and Butner—directed by the staff at the University. How emotional disorders develop is a second object of studies at those three institutions as well as in the Department of Psyciatry at UNC.

7. The projects of research in therapy and in fundamental fact-finding include not only the psychiatrists, but the psychiatric nurses, social scientists, and psychologists.

8. Medical students in their third and four years work in short periods at Butner and at Caswell Training School respectively; it is valuable experience for medical students regardless of whether they expect to become psychiatrists.

9. The staff of each mental hospital has representatives spending part of their time in further training at the University.

Those nine services, now practically indispensable, have come about in the five years since the School of Medicine and its Department of Psychiatry began to function at the University. Ten years ago these services were non-existent for the simple reason that there was no centralized and effective training-treatment-research agency for North Carolina's mental institutions.

Training Physicians.

Of the nine functions perhaps the most important is the training of physicians to staff the mental hospitals of the State. Those trained at the University now fill such positions as superintendent, chiefs of service, training directors and clinical directors, as well as nurses, psychologists, social service workers, occupational therapists, and social scientists.

The program of cooperation is arranged through Dr. J. W. Murdoch, who took over after the fine beginnings made by Dr. David Young, and by Dr. George Ham, head of the Department of Psychiatry at Chapel Hill.

Dr. George Ham measures the advancement that has been made with the things that are yet to be done. "The eventual goal of all workers in the field of psychiatry," he said, "is that of prevention. Our work and our watchword for the future should be to attempt to raise the sensitivity and the knowledge of the many people who are in the field so that detection of mental disorders will be as early as possible in the life of each individual in order that appropriate correction and treatment can be made."

Dr. Nathan A. Womack, head of the Department of Surgery reveals that in 1955-56 members of the surgical service from the university saw 2,692 patients in the state's mental hospital; they were called in for 162 consultations and performed 333 operations.

Dr. Kenneth Brinkhous, head of the Department of Pathology, said that the work in pathology done at Butner is valuable both to the State Hospitals system and to the teaching program at the university. He is at present planning a program of seminars in pathology for the staff at Morganton.

Residents Needed.

One of the major tasks — and this still confronts the State—is the difficulty of attracting and keeping residents, doctors who want to complete their required training before they go into practice. **The program at UNC is designed for 36 resident physicians in training at any one time.**

That means 12 physicians would complete their graduate training each year from the three-year course. However, as in other medical specialties there is a shortage of trainees, and there is another limiting factor of expense.

To encourage an additional number of residents to train at the University, a strong inducement offered is the experience the residents can get in the mental hospitals in the state. Residents go to the hospitals where they can work under supervision of the experienced staffs of these institutes and the consultants for the University of North Carolina Department of Psychiatry who make weekly visits.

The State Hospital Board of Control—trustees of the state hospital system—recognizes the value of acquiring more residents at UNC, and a 5-Years Program offering special financial incentives to prospective residents is now planned.

After the three years of residency, the doctor would remain at least two additional years as a physician at one of the state mental hospitals.

The true and final impact is the recognition that North Carolina's mentally ill are today the recipients of care and service that is a tremendous forward advancement.

19d 1957

MENTAL HEALTH

MENTAL HEALTH WEEK

MENTAL HEALTH WEEK

Nixon Rings Bell to Start National Fund Drive

WASHINGTON, April 25 (AP) —Vice President Nixon and Senator George A. Smathers, Democrat of Florida, joined in ringing a bell on the steps of the Capitol today to start Mental Health Week, April 28 to May 4.

"The bell we have just rung is a very unusual one," Mr. Nixon said, explaining that it was made from machine guns once used to treat the mentally ill.

The 375-pound bell was cast in 1953 for use in mental health fund-raising campaigns.

The ceremony was the start of a national drive during which 500,000 mental health campaigners will ring their neighbors' doorbells to collect funds to fight mental illness through research, prevention and improved treatment.

6 Getting Awards From Association For Mental Health

The Association for the Improvement of Mental Health, Inc., will present Adolf Meyer Memorial Awards to six men tomorrow at a luncheon in the Statler Hotel, it was announced yesterday by Dr. Milton M. Berger, chairman of the association's advisory committee.

The awards will go to the following:

DR. PAUL V. LEMKAU, director of the New York City Community Mental Health Board, for his work in advancing public health psychiatric services.

DR. RALPH M. KAUFMAN, director of the psychiatric division of Mt. Sinai Hospital, for the program he has developed at the hospital.

DR. ALEXANDER WOLF, professor at New York Medical College, for contributions to the development of group psychoanalysis.

ALTON BLAKESLEE, of The Associated Press, for a series of articles on mental health.

DR. D. E. CAMERON, director of the Allen Memorial Psychiatric Institute in Montreal, Canada, and DR. A. E. MOLL, of Montreal General Hospital, for their development of night and day treatment centers for the emotionally disturbed.

Dr. Meyer was a teacher of psychiatry at The Johns Hopkins University.

Mississippians OK Integrated Hospital

Commercial Appeal P.25

Wed. 5-8-57 Memphis

Sovereignty Board Knuckles Under On Land Donation For VA Facility —Senator Evans Dissents

From The Commercial Appeal Jackson, Miss., Bureau
By KENNETH TOLER

JACKSON, Miss., May 7.—A state agency with the specific assignment of preserving segregation Tuesday approved donation of state land in Jackson to the Federal Government for an integrated veterans hospital.

The action was by the 1956 Legislative created State Sovereignty Commission headed by Gov. J. P. Coleman.

Actually, the commission merely recommended execution of a 1954 legislative act authorizing the State Building Commission to donate the land for the Federal facility.

Governor Coleman, who is also chairman of the building commission, insisted on an expression from the Sovereignty Commission since it had earlier authorized a subcommittee to investigate integration in veterans hospitals in Mississippi.

"It would put us in a bad light over the country to deny the land and indicate we're willing to deny the veterans these facilities just to prove we're segregationists," the Governor said. "If we're going to be realistic, we should acknowledge that the Federal Government is not going to change its policy on integration. The question is whether we want to do it (donate the land) knowing it will be integrated."

Mixing Adults Different

Governor Coleman said "there's a great deal of difference between putting grown people together in a hospital and putting children together in a school."

The governor said he had opposed the study "as a rather futile proposition" but since it had been made and "we've got our feet wet we ought to make some kind of recommendation."

"We grabbed a tiger we can't handle," he said.

Evans Lone Dissenter

There was only one dissenting vote to commission recommendation of the land donation. It was cast by Senator Earl Evans Jr., of Canton, President pro-tem of the Senate.

Senator Evans said "it would be ridiculous to try and maintain segregation and then contribute land for an integrated hospital."

"Here a state agency created to keep segregation is in the position of being a part in the creation of an integrated facility," he said. "We're in the position of either endorsing an integrated facility or denying medical facilities to the veterans of Mississippi."

Governor Coleman said "that's it. I'm in favor of going ahead and giving the Federal Government permission to construct the hospital," he said.

Hugh N. Clayton of New Albany, Democratic National Committeeman, made the motion to recommend that the Building Commission carry out the 1954 legislative act authorizing the land donation for the hospital. However, he inserted a suggestion that the Building Commission "try to get such facility as far removed from the present University Medical Center as possible."

Senator Evans objected to placment of the veterans facility near the segregated university hospital and in the white section of Jackson in the midst of white schools.

Voting For Clayton Motion

Those voting for the Clayton motion were—

Lt. Gov Carroll Gartin, Atty. Gen. Joe T. Patterson, Senator William Burgin of Columbus, W. S. Henley of Hazlehurst and State Representative oJe Hopkins of Coahoma County.

Governor Coleman explained that if the chairman were entitled to vote he would have favored the Clayton motion.

Attorney General Patterson said a subcommittee had met with representatives of the various veterans organizations and they favored donation of the land in North Jackson. He said it would be better for state veterans to have facilities in Mississippi than be forced to go elsewhere. Attorney General Patterson said wherever the veteran goes he is faced with integrated hospitals.

Senator Evans said he was in accord with the proposal to provide treatment for Mississippi veterans at home but in view of the integration angle "it's a tough choice, especially when you are against doing anything that would contribute to integration."

Lieutenant Governor Gartin said he would not be "a part to turning our backs on veterans." He is a World War II veteran.

Call
Fri. 4-5-57
Kansas City, Mo.
P. 1



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DEPOSITS SECOND $10,000.00 CHECK. — Bishop Frederick D. Jordan has received the second half of the $20,000.00 hospital grant Douglass hospital was to receive from the Ford Foundation. Bishop Jordan, president of the board, is shown with the members of the hospital board depositing the check at Douglass State bank on the hospital savings account, started by the Bishop for the building fund when the first $10,000 was deposited about a year ago. Left to right: H. W. Sewing, president of the Douglass State bank, Eugene H. Kelly, administrator, Rev. J. Russell Brown, secretary and Bishop Frederick D. Jordan.

19d 1957

NATIONAL MENTAL HEALTH WEEK

Mental Health Aid Furnished By Red Cross's

WASHINGTON — (ANP) — This year's observance of National Mental Health Week, which began Sunday finds Red Cross volunteers serving more hours than ever before alongside other interested Americans in the never-ending battle against mental illness.

During the past fiscal year, Red Cross volunteers served a total of 484,000 hours in 151 civilian mental institutions, assisting the professional staffs in the rehabilitation of patients.

This is about 103,000 more hours than Red Cross volunteers served in 120 hospitals during the preceding 12 months.

Red Cross volunteers last year also worked in military and VA hospitals as part of the organization's congressional charter obligations to provide services and assistance to members of the armed forces and veterans.

They worked a total of 1,100,000 hours with the patients of 224 military hospitals, including those in psychiatric wards. During the same period, the organization's volunteers served a total of 2,232,000 hours with VA hospital patients, including those in 40 entirely devoted to the treatment of mental illness and the 78 which had organized psychiatric or neurologic services.

Volunteer work in any hospital — military, veteran or civilian — is organized and directed by the professional staff in the way best suited to the needs of the particular patient. An increasing number of Red Cross chapters are cooperating with civilian mental institutions in developing a program of volunteer service.

This joint program, supervised by the hospital staff, is geared to the patients needs, his treatment and his progress toward recovery. The work of the volunteer supplements that of the professional staff which is always too small and too busy with the basic care and treatment of the patient to give him the personal attention so important in his rehabilitation.

Through regular visits with the patients, many of whom have few if any visitors, the volunteer frequently takes the place of family and friends and reads to or talks with the patient.

Through teaching classes in various arts and skills recommended by the hospital staff, the volunteer leads the patient into creative activities which sooth the troubled mind.

Through such activities as beauty care and charm classes, these workers also help to restore the patient's interest in his personal appearance. Through group singing, dancing and dramatic activities, they assist the patient to break out of his own dark, troubled world.

When the patient is far enough along the road to recovery, and the hospital staff considers it advisable, the volunteer escorts him to community events and on recreational trips.

These excursions not only help the patient make the economic and social readjustments necessary to move from hospital care to normal community life but help the community to adjust to the patient and the institution as well.

19d 1957

NEBRASKA

'Mental Hospital of the Future' To Open This Fall

OMAHA, Nebr. — The "mental hospital of the future" will be opened in Omaha this fall—the latest addition to Omaha's growing medical center.

Doctors and Public Health Service officials are watching the development of the Richard H. Young Memorial hospital, believed to be the first project of its kind to be approved by the Hill-Burton program for hospital development.

It will be the first private hospital in this area equipped to handle—under one roof—a complete program for the diagnosis, treatment and rehabilitation of psychiatric illnesses.

In no way will the new hospital resemble the popular conception of a mental institution. Barred windows and locked doors are out. There will be large areas for various recreational activities, and throughout the building—by structural design, use of color and furnishings—a spacious, almost resort-like atmosphere will prevail.

In medical circles, the plans for the hospital are regarded as the "standard" of excellence. It will embody all the features deemed necessary by experts in the field—interior decorations that are conducive to comfort, out-patient and after-care services for discharged patients and ample room and equipment for all methods of treatment as well as group and individual activities.

In appearance and furnishings, much of the hospital will look like a wonderful place to spend a vacation.

19d 1957 NEW YORK

105 Babies, Children Evacuated As Blaze Perils Harlem Hospital



United Press Photo.

Harlem Hospital nurses have the ticklish job of keeping premature babies alive after their evacuation early today from flame-menaced pediatrics building. The infants later were removed safely to Bellevue Hospital.

Panic Averted Through Heroic Efforts by Doctors and Nurses

By GEORGE MONTGOMERY,
Staff Writer.

Working feverishly to stave off panic, nurses and doctors successfully evacuated 105 children, 31 of them premature babies, from Harlem Hospital's pediatrics building early today as flames from a four-alarm fire next door menaced it.

The blaze, in a new wing under construction, also resulted in the routing of 165 other patients from their beds. The fire in the wing at 11 W. 136th St. was brought under control by more than 125 firemen about 6 a.m. No injuries were reported.

A baby was born while the fire raged. The child is Mary Katherine, daughter of Mrs. Mary Duzen, 33, of 167 W. 146th St. Both are doing fine, the hospital said.

Sixty nurses and 20 resident physicians carried out the evacuation calmly and smoothly. There was no panic as the 31 "premies" in isolation baskets and incubators were transferred to Bellevue Hospital.

Seventy-four other children were removed safely to Knickerbocker, Sydenham, Morrisania and Metropolitan hospitals.

The pediatrics building lies directly behind the burned-out wing, where the blaze broke out about 4 a.m. on the ground floor. Patients also were evacuated from the women's pavilion to the west.

The blaze was restricted to the destroyed wing.

As the patients were moved, firemen mounted the hospital fire escapes facing the side of the burning structure to spray streams of water on the upper stories of the skeleton building.

They pumped water on the mounting blaze, which shot up through all seven stories of the building. The operation was directed by Fire Chief Edward Connors.

The flames destroyed lumber, scaffolding, planks and other equipment piled up on the partly constructed building, according to Chief Connors.

The wing destroyed by the fire was to be used for incoming and outgoing patients. No estimate of the damage was available immediately. Cause of the fire was also unknown.

Henderson to Build New Negro Hospital

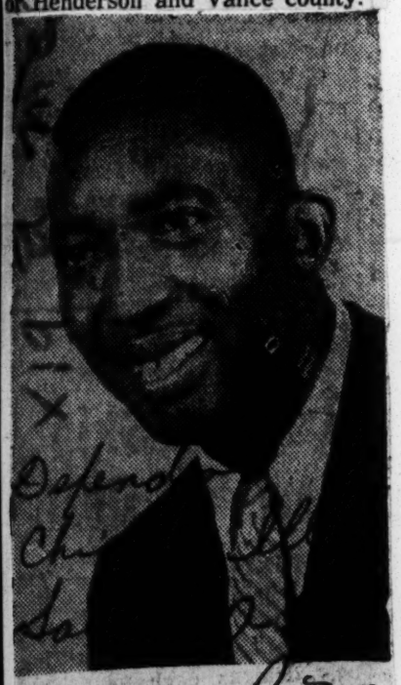
HENDERSON, Feb. 14—Plans reportedly are in the making for a new Negro hospital in Henderson to replace the present Jubilee hospital facility. It is expected to be located in the northwestern part of town on a site considerably larger than the present property on Witherspoon street.

It is understood an architect is preparing sketches, to be followed by definite plans. Just how soon the project will materialize has not been learned.

Jubilee hospital is owned by the United Presbyterian Church. It has been operated here for more than 40 years, but its equipment is not modern and is not such as to provide the best in hospital treatment.

While nothing definite is known, it is expected that Federal and State Medical Care aid may be available in whatever in whatever development comes out of present plans.

The United Presbyterian Church formerly owned Henderson Institute, but his was sold to the county several years ago, and today is the Negro high school for both the City of Henderson and Vance county.



DR. LEONARD H. ROBINSON, chairman of the Social Science department at A & T college, Greensboro, N. C., has been named a member of the advisory committee to the Training School for the Feebleminded to be opened at Goldsboro, N. C. The appointment was announced by Luther Hodges, governor of North Carolina.

Eagle Tulsa, Okla.
Thurs. 3-7-57 p. 1



LOOKING IT OVER — Here Dr. J. Huston Burt, chief of staff at Moton nospital, and others look at a new anesthesia machine installed at the hospital last week. Holding the mask and explaining the operation of the machine is Dr. William L. Harris, a member of the Moton medical staff. Others pictured, reading l. to r., are Mrs. E. L. Goodwin, Sr., a member of the Moton Board of Directors; Mrs. Beatrice Snaden, Mrs. Rosa Cooksey and Mrs. Wilma Hollier, all Moton nurses. The machine, an all-inhalation anesthesia device, is valued at $300.

(Eagle Staff Photo)

Eagle Tulsa, Okla.
Thurs. 3-7-57
p. 1



CUTTING THE RIBBON — Mayor George E. Norvell is about to cut the ribbon which is draped before the entrance to Moton hospital's new $12,500 elevator. The self-operated elevator, installed through funds received from the Ford Foundation, has added considerably to services at the hospital. With this addition patients, visitors and staff members can go from one floor to another instead of climbing steps. Previously, the old hand-operated elevator was used only for patients and food service trucks.

Moton Hospital Gets Elevator, Gas Machine; Mayor Is Guest

Eagle Tulsa, Okla. Thurs. 3-7-57
p. 1

Two recent additions at Moton Memorial hospital are expected to facilitate and improve services offered at the North Tulsa medical center, according to J. T. A. West, administrator.

A new, self-operated elevator, installed at a total cost of $12,500 was formally dedicated Thursday. While on Feb. 25, the hospital received an $300 McKessons all- inhalation anesthesia machine. Both additions to the hospital facilities were made through funds from the Ford Foundation.

Present to cut the ribbon on the door of the new elevator Thursday was Tulsa's Mayor George E. Norvell. Others on hand to witness the event were Primus C. Wade, chairman of the Moton board; Dr. J. Houston Burt, Moton chief of staff; Mrs. E. L. Goodwin, Sr., a member of the board, and Roy Roller, board secretary.

Also present for the dedication were Gordon Hicks of the National Bank of Tulsa, Mrs. Hughey Baker and Louis Taubman; Ben G. Sweet of the Tulsa Elevator company, the firm which installed the elevator; Dr. William L. Harris, member of the Moton medical staff, and Mr. West.

In operation now for about 30 days, the elevator has brought about a much-needed change in working procedures.

Elevator is Big Help

"The old elevator was hand-operated and used only to convey patients up and down, and to transport food service trucks," Mr. West reported. However, with the new elevator it is possible for visitors and members of the hospital staff to ride in addition to the other services.

Eagle
West told The Oklahoma Eagle, "We are doing repair work on the entire hospital to include redecorating and painting." He said funds for this proposed improvement were also part of the Ford grant.

Dr. William L. Harris, a member of the Moton medical staff, explained the new anesthesia machine. He said it is one of the most modern small units of its kind available today, adding that it can be adapted to any patient.

Manufactured by the McKesson Appliance company, the machine has double breathing bags and valves in an adjustable mask. It can be used for oxygen, ether, and other inhalation anesthesia.

Dr. Harris stated that before the new machine was installed the hospital was limited in the types of anesthesia which could be administered patients in the operating room. Spinals, locals and open drop inhalation of ether methods were among those mentioned.

Now the hospital is equipped to offer a greater range of what the doctor termed "good, relaxing anesthesia" with the addition of the McKesson machine. He pointed out that the machine has cannister traps which cleanse the exhaled air. Instead of using a new supply of gas, a desired amount is used over again making it possible to control the supply given the patient.

Eagle Tulsa, Okla.
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Moton Hospital Occupancy is on the Increase

Wade Says Many Things Responsible; West Commended

A recent progress report from Moton Memorial hospital, compiled June 30, shows that occupancy of the hospital has increased over 50 percent during the last six months.

Primus C. Wade, Tulsa attorney and chairman of the Moton Board of Directors, told The Oklahoma Eagle Wednesday that in the past occupancy of the hospital was from 33 to 35 percent. He said the Board had observed increase of 57 percent in an 8-month period.

Moton, a 42-bed hospital, had 45 adult patients and 10 beds with infants in the maternity ward last Friday.

Wade said this marked increased cannot be pin-pointed. He emphasized that a number of things were, no doubt, responsible for the increase in the use of the hospital.

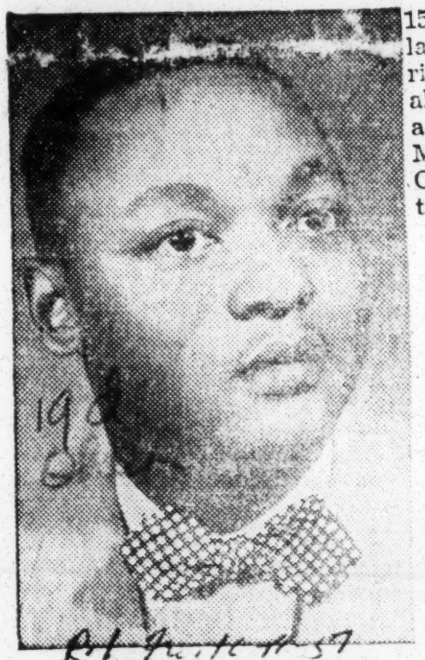
Among those worthy of mention he cited improvements in facilities and services, better management, and use of the hospital by a larger number of doctors from both the Tulsa County Medical society and the North Tulsa society.

Statistics-wise, the hospital from Nov. 1, 1956 to June 30, 1957, admitted 781 patients. There were 275 operations, 481 birthhs and 255 emergency cases. On the other hand, for the whole period of 1954-55, the hospital had 1,146 patients. There were 102 operations, 532 births and 255 emergency cases.

During the past 12 months the hospital was the recipient of $15,000 from the Ford Foundation. This money was used to purchase an elevator, and helped with other improvements, the report indicated. These additional improvements were braced frame-work of building, $231.90; wiring the operating room, $259.72; gas machine, $612; cylinders for gas machine, $81, and storm doors, $534.70.

Wade praised the work of J. T. A. West, hospital administrator, who helped to bring the institution out of the "red" into its present state of being able to pay its bills. For the past 18 months the hospital has operated in the "black," the board chairman reported.

Oklahoma Cityan Opens Dental Office This Week



DR. BRENT D. DULAN

A native son and a product of the Oklahoma City public school system returning to the hometown scene to hang up his shingle is Dr. Brent D. Dulan, who officially opened his dental office for practice Tuesday, October 8, at 2121 N. E. 23rd.

The young dentist will be host to the public at an Open House scheduled for 3 p. m. to 6 p. m. Sunday, Oct. 13, at the dental office.

A Douglass high school graduate, Dr. Dulan received his undergraduate degree from Fisk university in Nashville, Tenn., in 1948. From 1949 to September of 1951, he attended the University of Oklahoma where he did work in Parasitology. From there he went to Meharry Medical college where he received the D. D. S. degree.

A recipient of the American Society of Dentistry for Children prize for outstanding work in pedondontic theory, technic and practice, the medic is a member of the Kappa Sigma Pi and Omicron Kappa Upsilon honor societies and the Kappa Alpha Psi social fraternity.

Following his graduation from Meharry in 1955, Dr. Dulan spent two years in the United States Army stationed at Fort Sam Houston, Texas, and later at Camp Polk, La., where he received his discharge this year.

The son of Mrs. Olive Dulan of 1501 N. E. Grand Blvd., and the late Otis E. Dulan sr., he is married to the former Peggy Jones, also of the city. The couple has a 3-month-old daughter, Brenda Marie. Dulan is the brother of Otis E. Dulan jr., a member of the Douglass high school faculty

Construction Work To Start Soon On New Negro Hospital

News + Courier Thurs. 4-13-57

Charleston S.C.

Work is scheduled to begin soon on construction of McClennan-Banks Memorial Hospital in Charleston.

Contract agreements for the 31-bed hospital for Negroes were approved by U. S. Health Service officials and signed yesterday.

County Council awarded the construction contract to Charleston Constructors, Inc. on a low bid of $539,579. The federal government will pay half the cost. The hospital is scheduled to be ready for use in July, 1958.

Filling and leveling of the hospital site will begin within a few days, a spokesman for the contractor said.

Two-Story, 35-Bed Annex Planned At Negro Hospital

(Drawing on Page Five)

By RICHARD T. ALLEN

A pressing need for additional facilities at Collins Chapel Hospital will bring about construction of a two-story wing to the Negro institution in the near future, Frank R. Ahlgren, chairman of the hospital's executive committee, said yesterday.

Addition of the new wing will be the second phase of long-range building plans of the hospital at Lane and Ayers, said Mr. Ahlgren, who also is editor of The Commercial Appeal. The third phase will be the addition of a third story covering the present building and the new addition.

Space For 35 Beds

The wing, which will contain space for 35 beds, an additional operating room, new elevator and a storage basement, will cost about $200,000. There will be no solicitation of funds to finance the construction.

"This new addition is possible without new funds because of the prudent and efficient management of Miss Eva Cartman, administrator, and the hospital's management committee," Mr. Ahlgren said. The committee includes Rev. J. B. Boyd, J. M. Crews, administrator of Methodist Hospital, and Raymond Skinner of Forest Hill Dairy.

Mr. Ahlgren pointed out that the hospital's reserve fund includes a grant of $25,700 from the Ford Foundation, obtained through the efforts of John Loch, attorney for the trustees.

Working Out Details

Details on the addition will be taken up as soon as minor details are worked out. Estes Mann is the architect.

Mr. Ahlgren made the announcement after the proposal was approved by the board of trustees, headed by Bishop J. Arthur Hamlett of Kansas City, senior bishop of the Christian Methodist Episcopal Church.

Mr. Ahlgren said the addition will be constructed in the direction of Ayers and will be built on space now used as a parking lot. However, he said, several cottages will be moved and one old building razed to provide additional adequate parking space.



WORKSHOP CONSULTANTS - Dr. Winifred Ingram, director, Department of Clinical Psychology, Hawthorn Center, Northville, Michigan, general consultant for a Workshop on Mental Retardation, held at Southern University and Dr. Bessie M. Williams, specialist, Exceptional Children and Youth, Department of Health, Education and Welfare, Office of Education, Washington, D.C., one of the main speakers. Sponsored by the Department of Special Education at Southern, the workshop had more than 100 special education teachers and interested workers registered for the 9-day course.

19e 1957

TUESDAY

TUSKEGEE INSTITUTE

DAILY ACTIVITY SHEET

19e

Issued Through Division of Public Relations

Tuesday, May 14, 1957

VOLUME III NO. 126

IT IS BETTER TO BE SAFE THAN SORRY

The time to prevent crippling polio next summer is now! Right now everyone under forty is urged to start polio vaccinations if he hasn't already done so, and take his second and third shots, if he has made the start. For good primary protection, at least two doses of vaccine are required before the next polio season. So don't delay.

Dr. T. M. Campbell, Jr. who administers the program Wednesday -- tomorrow--May 15, from 8:00 a.m. through 4:00 p.m., urges all students who haven't had two shots of polio to come for a shot on Wednesday.

This is all free and it can weel be the greatest gift that Tuskegee Institute has ever received. There is no need to remind you of the Chicago epidemic last summer or the Montgomery epidemic three years ago when scores of persons fell victims to polio. We can be fortunate to have just the protection needed to save us from a future in an iron lung or braces which we would wear the rest of our lives.

Then there is the obligation which we owe to others. We who have contacts and educational advantages far in advance of our fellowmen at home can be ambassadors in our local communities this summer.

We can tell them that we have ours and urge them to get theirs. Tell them not to gamble with the good health of their families! Prevent paralytic polio! Vaccinate now!

Remember that it is better to be safe than sorry.

11 of 19 D. C. Polio Cases Reported Along Southwest Waterfront Area

By EMERSON BEAUCHAMP

Polio in the District this year has struck hardest in a fan-shaped area along the waterfront in Southwest Washington.

Nearly 60 per cent of all cases have come from this area, bounded roughly by the Washington Channel, D street and Second street.

Nineteen cases have been reported in the District, all of them in the last four weeks. Of the total, 11 are from the Southwest area. The two latest ones were announced only yesterday.

Last year only, 11 cases were reported anywhere in the District all year long.

Quickly Taken Ill

The first case this year was reported from the Southwest area last July 25—6-month-old David Dillon of 485 H street S.W. His first symptoms had appeared a week before.

"One day he was playing and the next day he was sick," recalls his mother, Mrs. Percy Dillon. "When he woke up that Thursday morning, he cried and he was running a fever. For two days he ran a temperature and couldn't keep any of his food down.

"By Saturday he was better, but Sunday he got worse again, and his neck was stiff. We took him to the hospital that day."

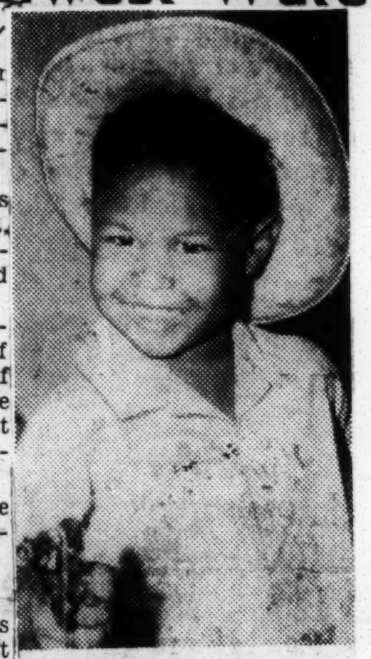
David, who was diagnosed as a paralytic case, is moving his legs now and has good use of his arms. He had no Salk vaccine shots before the disease struck him, but his sister Cynthia, 4, and his brother James, 2, had the full series of three shots.

Pain Develops

Another mother, Mrs. Edna Lipscomb of 480 I street S.W., noticed first that her son, 3-year-old Dane Kelton, was walking with a limp.

"That same night, he got a pain in his leg," she said. "It didn't bother him as long as he sat still, but it hurt him when he tried to walk."

The next day she took the boy to the hospital, where his case was diagnosed as non-paralytic. Dane had had no Salk shots.



CHARLES GALLOWAY, Jr.

Recovering From Polio

Only a few doors away, at 468 I street S.W., the disease struck again a week later. The victim was 4-year-old Sarah Blake.

"She ran a fever for three days," said her father, John Blake. "Then her legs began to buckle under her and she fell down one day in the kitchen."

Mr. Blake said Sarah and Dane had played together occasionally. Sarah had received two Salk shots, one last October and another in December. Her third was due this month.

A few blocks away, at 1234 Third street S.W., 18-month-old Paul Thomas began running a fever.

Walking Ends

"He was hot all over," said his grandfather, Lee Thomas "I said it must be typhoid fever or something. Then late the next day he stopped walking, and I knew something was funny."

Paul slept with his 3-year-old brother Charles. Neither had had Salk shots, but Charles hasn't been stricken.

One of the first victims, 4-year-old Charles Galloway, jr., of 326 McLean avenue S.W., already is beginning to run and play again. He has been home nearly two weeks now, after 15 days in the hospital.

Like the others, Charles began running a fever. For five days his mother gave him alcohol rubs; the fever broke each time, but it always came back. Then came a headache and a stiff neck. A spinal test confirmed that he had polio.

Charles had had no Salk shots, but he took his first one yesterday. Doctors recommended that he be inoculated to guard against the recurrence of the disease in another form.

One of the cases reported yesterday was 3-year-old Jerry Moore of 923 Golden street S.W. He had one Salk shot two years ago, according to his mother, Mrs. Ruth Moore, but none since.

Eyes Crossed

"On Monday I noticed that his eyes were crossed," Mrs. Moore said, "and his mouth was twisted. He couldn't stand on his legs. He ran a fever and he was nauseated."

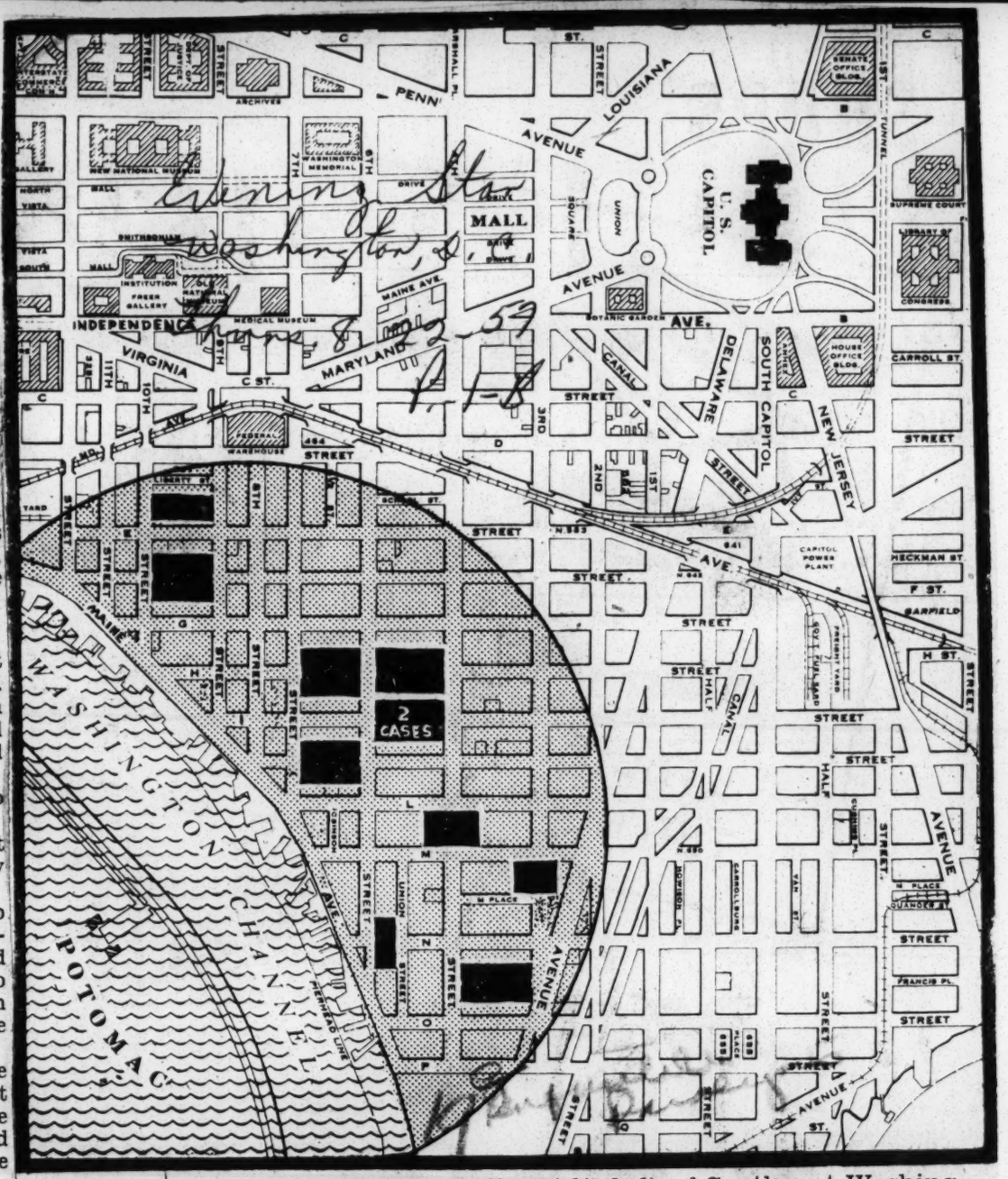
On Tuesday she took him to the hospital.

Why has polio singled out this one area for such a heavy siege?

No one knows, according to a Health Department spokesman. "It's an overcrowded area," he continued, "but no more so than last year, when we had only 11 cases anywhere in the District all year long.

"Undoubtedly some of the victims had been in contact with each other. One of the Southwest cases, we know, had been in contact with a case from Northeast Washington—but we can't be sure that's true every time."

The Health Department is looking for a possible common source of the disease in the Southwest area, such as water, sewage disposal units or playgrounds.



POLIO AREA—Map shows the section (shaded) of Southwest Washington in which 11 of the city's 19 polio cases this year have occurred. Black rectangles show the blocks in which the stricken persons live. One block has had two cases.—Star Staff Map.

Wetumpka Negroes Get $700 for March of Dimes

Advertiser Montgomery Ala
Sat. 2-23-57

By J. A. BROWN

WETUMPKA — Despite getting off to a late start, Negro groups here came up with over $700 for the annual March of Dimes Drive.

With Mrs. Lelia Porterfield of Wetumpka Rt. 4 serving as chairman for the group, workers spared no effort in making contacts and raising money. Knowing the situation, perhaps better than any group, the schools took top honors raising a total of $396.27. And with excellent support and leadership from ministers, the churches placed second with a total of $192.45.

Working in connection with the civic league, churches, schools, lodges, societies, clubs and special groups began planning procedures early last month. During the first weekly meeting of the League in January William Thomas, Elmore County March of Dimes chairman, talked to the group describing the polio situation in the United States. He pointed out the need of thousands who have been stricken with the disease. He stressed the fact that many of these persons will need continued help — medical care, braces, wheel chairs, iron lungs and training for future vocations.

The drive concluded with a talk on polio by Mrs. Louise Trigg, medical social director of the John Andrew Memorial Hospital, Tuskegee Institute. A large group of leaders and workers from all sections of the county gathered at the Rodgers Chapel AME Zion Church, Sunday, Feb. 3, to make reports and hear the speaker. Insuring the listeners that the polio situation is much improved as a result of the Salk Vaccine treatments, Mrs. Trigg said that the job is far from finished. She listed the many needs for those already stricken with the disease, and hinted that the National Foundation stands ready to advance into other areas of research in an effort to find cure for other diseases. Mrs. Trigg pointed out also that there is still a big job to be done toward getting thousands of adults under 50 years of age vaccinated.

Organizations supporting the drive, group chairmen and amounts raised are as follows: Schools, Mrs. Elnora Hines, chairman, $396.27; churches Rev. D. M. Foster, chairman, $192.45; blocks and streets Mrs. Roberta Steele, chairman, $44.29; home demonstration clubs Mrs. D. O. Thornton, chairman, $19.30; lodges C. M. George, chairman $14.25; societies, Alex Jones, chairman $11.91; social clubs Mrs. Mary E. Stewart, chairman, $10.85; Eastern Star, Mrs. Mollie Stewart, chairman, $10.40; and miscellaneous, $33.53—a grand total of $733.25.

Closing the March of Dimes Drive early in February, the Civic League is making ready to support the annual Red Cross Fund Raising Campaign. Roscoe Lee has been named to serve as county chairman for Negro groups.

19e 1957



Wreel Wed 1-23-57
B'ham, Ala. p.3

TEENS FIGHT POLIO — Trudy Williams of "Six Teens," famec West Coast television and radio singing group, sets example for all teens. She has joined the March of Dimes and wants you to help her fight polio. Millions of teens are members of Teens Against Polio. The 1957 March of Dimes theme is "Let's Finish the Fight!"

INFANTILE PARALYSIS

POLIO STRIKES ADULTS



Bystander
Thurs. 1-24-57 p. 6

Lloyd Bachus, 33, is a victim of polio. Physical Therapist Althea Warner is shown devising exercises to strengthen paralyzed hand muscles. When polio strikes adults, the attacks are frequently more severe than those suffered by children. March of Dimes funds aid polio patients, train professional workers, support research and polio prevention programs. The 1957 March of Dimes opens January 2.

UNFINISHED BUSINESS

Join THE MARCH OF DIMES



Calvin Mayfield, 1957 Poster Boy, dramatizes the thousands of polio patients of 1956 and prior years who still require March of Dimes assistance. Help finish the job by generous contributions to the March of Dimes, Jan. 2-31.



THE MOTHERS' MARCH on polio to be conducted tomorrow night, is explained to some youngsters it will help by Mrs. Robert Diehl, County chairman of the fund-raising campaign. Listeners are, from left, Karen Lee Ford, 5, of 554 Harding; Yoland Keltee, 9, of 2122 S. Floyd, and Buddy Evans, 7, Fisherville. The marching mothers will go from door to door from 7 to 8 p.m.



YOUTH AIDS POLIO DRIVE

Edward S. Williams, jr., 7, son of the minister of Grace Methodist Church, Fairmount Heights, Md., turns over to Ulysses Mackall, member of the executive board of the Prince Georges County Chapter of the National Foundation for Infantile Paralysis, the polio funds the congregation contributed when he passed a coin plate at the church the past four Sundays.



Mod. Sat. 2-9-57
Birm, Ala. P.1

TWO HITS OF THE MARCH OF DIMES FASHION SHOW, held at the Waldorf, New York, this past week, were Miss Lena Horne and the 1957 March of Dimes poster girl, Marlene Olsen of Boston, Mass. Modelling the gown shown above, which was designed by Robert Mackintosh, Miss Horne joined other stage and screen celebrities in doing their bit for the polio fighting organization. More than 1,200 guests were present at this fund raising event.



THESE MOTHERS MARCHED ON POLIO — The Friendly Neighborhood Club, with Mrs. Grace Keith as president, (extreme left) pooled the resources of its membership, and staged a "mothers march on polio" recently. The presidents of two other Clubs, Mrs. Bernice Gore of the Catillion, and Mrs. Louise Hector of the Comopolite, joined the march. The clubs contributed and collected a total of $202.45. — (Perry's Photo)

Polio Fund Defender Announces Chicago, Ill. New Grants

Sat. 3-2-57

NEW YORK — The National Foundation for Infantile Paralysis has made 19 grants and appropriations, totaling $745,945 for professional education, Basil O'Connor, president of the organization said this week. P. 12

The new awards, made possible by March of Dimes funds, brings to nearly $25 million the national foundation's allocations in the field of professional education since 1938, O'Connor said. This is the largest professional education program ever undertaken by a a voluntary organization.

Seven new appropriations, amounting to $395,000 in all, will provide March of Dimes fellowships and scholarships for physicians and associate medical personnel in a variety of fields. For example, included are scholarships for the education of physical therapists and fellowships for scientific investigators in the techniques of tissue culture.

For additional appropriations, totaling $75,000, cover the preparations of new editions of two basic medical texts on infectious diseases, the publication of a supplement to a bibliography of infantila paralysis and the preparation of two films dealing with respiratory physiology and with concepts of rehabilitation.

Eight grants, for a total of $275,245, provide for the continued support of the teaching of rehabilitation to medical students at three universities, for instruction of physical and occupational therapists in polio treatment at Georgia Warm Springs Foundation, for the recruitment of students of professional nursing, practical nursing and medical social work, for support of a reference center on self - help devices used by handicapped patients, and for the abstracting of research and medical literature on polio.

The March of Dimes president said the organization has supported the education of a number equal to one-third of the qualified physical therapists now active in the nation.

Mayor D. Cameron Greets Executive Charles Bynum

Journal P.1
Sat. 2-16-57
Wilmington, N.C.

Mayor Dan D. Cameron welcomed Charles H. Bynum, who is the executive director of the National Foundation for Infantile Paralysis, Monday; and congratulated him for the great job he is doing in the field of Infantile Paralysis. He stated that everybody should contribute to this worthy cause.

Mr. Bynum spoke to the local group of Polio volunteers and committees Monday night, urging them how important the 1957 campaign of the March of Dimes is this year. The National Foundation needs 47,000,000 this year to continue its work in the field of polio. There are thousands of victims looking to you for help. You can help these people get back to their families by giving very liberally to this cause, the speaker said.

People 25 to 45 should get their shot of vaccine and parents should see to it that their children get their shots too. He stated that the Salk polio vaccine has done a lot in stamping out this dreaded disease; but there is still plenty of

work to be done. And the Foundation needs your help.

He urged volunteers to take part in the mother's march which will be held very soon in your community. Only a few days ago, the U. S. Public Health Service released statistics showing that polio incidences in 1956 was half of that in 1955. And this month, she'll be at your door again. She'll be at your door to ask you to hlep finish the polio job, for much remains to be done. You can help in two ways: Give to the March of Dimes —to remember the thousands of children and young people now disabled by polio who still need care. And you can help by getting vaccinated against polio.

The meeting was opened with a prayer by Rev. B. E. Hardy.

NEGRO CHILDREN GIVEN 25,518 POLIO SHOTS

31 City, County Schools Visited By Team

A total of 25,518 doses of Salk polio vaccine have been given to Negro children in 31 city and 38 county schools by the Memphis and Shelby County Health Department, Dr. L. M. Graves, director, reported yesterday.

A team consisting of a public health nurse and two licensed practical nurses administered the vaccine under supervision of Dr. Nobel W. Guthrie, director of medical services for the health department.

In addition to polio vaccine, 3959 Negro children were vaccinated against smallpox.

All white and Negro children through age 19 have now had opportunity to get the polio vaccine, Dr. Graves said.



VACCINATE BEFORE TOO LATE—Dr. E. Mae McCarroll, Newark, N. J., gets her polio shot from Dr. John A. Kenney, Cleveland, Ohio. Dr. T. M. R. Howard, Chicago, president of the National Medical Association, looks on as Dr. B. F. McCleave, Memphis, assists Dr. Kenney. National Foundation for Infantile Paralysis has launched a nationwide program to vaccinate all people under 40 years of age.

Let's Finish The Fight



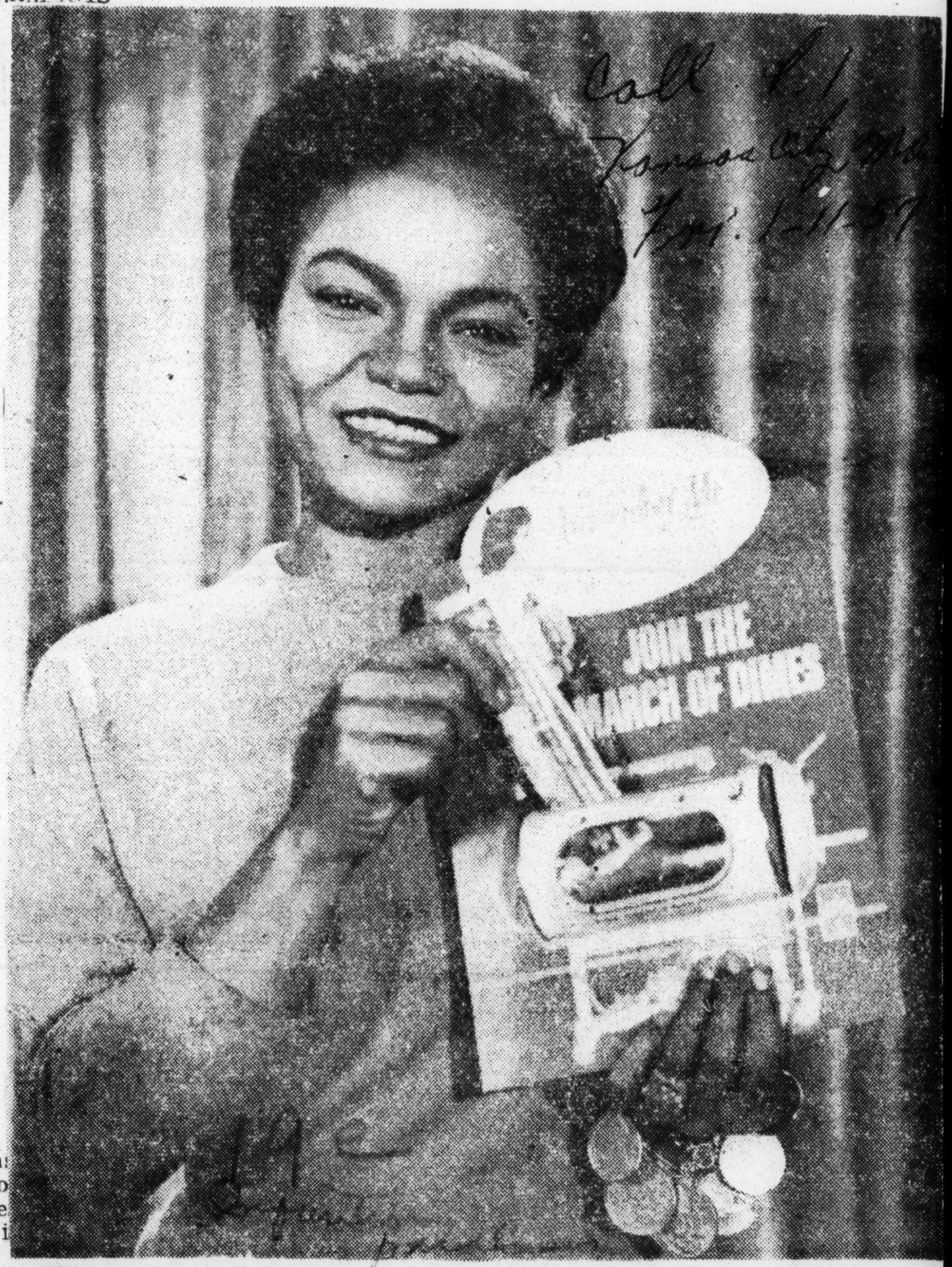
mrs. Roger Morgan, St. Albans, New York, presents Miss Elaine Whitelaw, Director of Women's Activities, National Foundation for Infantile Paralysis, a check to help "Finish the Fight" against polio. Mrs. William Grayson, St. Albans, New York, is Queens County Chapter Jack and Jill of America Fund Raising Chairman. To "Finish the Fight" against polio, National Jack and Jill Chapters are preparing for participation in [illegible]alk vaccine program for all perso[illegible]ars of age.



Call #1
Houston Chronicle
Jan. 1-19-57

Informer
Houston, Tex.
Sat. 1-19-57
P. 3

LINDA GOES TO SCHOOL - Polio struck Linda, age 6, when she was only six months old. After a long series of physical therapy treatments she enrolled in regular school. Today Salk polio vaccine will protect children and adults from paralytic polio. Everyone under 40 years of age should get polio vaccine. Developed with March of Dimes raised funds, it is safe and effective. Get your polio vaccine shot now.



SINGER SUPPORTS POLIO DRIVE. — Eartha Kitt, the famous singer, [illegible]s for the March of Dimes each year. She and other famed stars give their support to this campaign because they know how necessary it is to raise funds to aid polio victims stricken too late to be helped by Salk vaccine. Funds also are used for research, for professional education and for polio prevention. Until millions more Americans get polio vaccine, the crippling disease will continue to strike. All persons should get the Salk vaccine as soon as possible. In the meantime, to help finish the fight against polio, support the March of Dimes during the month of January.



Heard
P. 1
Atlanta Ga.
Wed.
1-2-57

SUPPORT POLIO DRIVE — Eartha Kitt works for the MARCH OF DIMES each year. Famed star knows March of Dimes funds support patient aid, research, professional education and polio prevention. Until millions more Americans get polio vaccine, the crippling disease will continue to strike. Get your polio vaccine now.

APPEAL FOR POLIO FUND



William "Bill" Willis, Cleveland, Ohio, recreation supervisor, Mrs. Ruth Caston Mueller, Los Angeles, Calif., regional director of National Council of Negro Women; T. C. Jervay, Wilmington, N.C., president of National Newspaper Publishers Association; and R. A. Carter, Albany, Ga., dean of Alabama Agricultural and Mechanical College appeal for funds to help finish the fight against polio. Until America is polio-safe, the March of Dimes must raise millions of dollars to aid victims of the crippling disease. Make your March of Dimes contribution today.

Daily World
Atlanta, Ga.
Tues. 1-8-57
P. 1



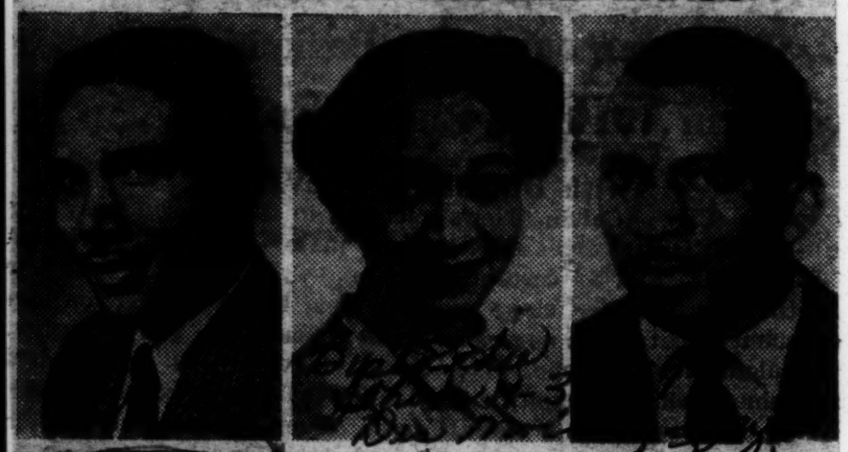
Mrs. Ercelle Moore, Imperial Commandress, Daughters of Isis, visits polio patient at Rancho Los Amigos, Los Angeles, Calif. Daughters of Isis have joined the great army of organized polio fighters seeking to finish the job of Polio Business. Funds to fight polio will be raised in the March of Dimes, January 2-31, 1957.

"Never have so many people learned so much about one disease in so short a time as they have about polio. The reason for this is that as contributors and workers in the fight against polio through the March of Dimes the people have rightly felt that they were shareholders in the battle and have been eager to know how it was going."—Basil O'Connor.

19e 1957

INFANTILE PARALYSIS SCHOLARSHIPS

TOMORROW'S HEALING HANDS



March of Dimes funds are used to train professional workers in medical and the related biological and physical sciences. Shown above are dimes funds scholarship winners: Samuel L. Clark, Nashville, Tenn., medical student at Meharry Medical College, for summer medical research; Jean Robinson, Edwardsville, Va., medical social work at University of Michigan; and Willie F. Payne, Atlanta, Ga., predoctoral study in zoology at State University of Iowa.

19e 1957

NATIONAL INFANTILE PARALYSIS

LEADERS ENDORSE DIMES CAMPAIGN



MRS. CHARLES HAYES



MRS. OSBETH ADAMS



Mrs. Charles B. Hayes, Niagara Falls, N.Y., president of Women's Auxiliary to National Medical Association; William H. Dennis, Jr., Albany, Ga., president of Albany State College; James C. Gilliam, Clarksdale, Miss., Grand Master, Prince Hall Masons of Mississippi; and Dr. Maurice Rabb, Louisville, Ky., have stated that the "March of Dimes must be successful. 'The Job Isn't Finished!' until victory over polio is won." The 1957 March of Dimes opens Jan. 2 and closes Jan. 31.



Defender P. 12
Sat. 1-12-57
Chicago, Ill.

MRS. GLADYS DIXON



MRS. RUTH G. MUELLER

WOMEN LEADERS from four corners are endorsing the current March of Dimes campaign for funds which closes on Jan. 31. Typical are Mrs. Charles B. Hayes of Niagara Falls, N. Y., president of the Women's auxiliary to the National Medical association; Mrs. Osbeth Adams, Chicago, vice-president, Jack and Jill of America, Inc.; Mrs. Gladys Dixon, Baltimore, Md., director of public relations, Daughter of Isis and Mrs. Ruth Caston Mueller, Los Angeles Calitional Council oef Negro Womtional Council o fNegro Women. They urge generous contributions to finish the polio fight.

JACK AND JILL CLUB AIDS POLIO DRIVE

Daily World Sun. 1-13-57
Atlanta Ga. P.

"Let's Face The Job" is the motto of millions this month as the National Foundation For Infantile Paralysis urges full support of four unfinished items: prevention, patient aid, research and professional training.

This month is of special significance to the Atlanta Chapter of Jack and Jill of America, Inc. which supports the March of Dimes in keeping with the national project of the organization. As one unit of the nation wide organization which numbers 2,687 mothers 1,238 teenagers and 3,011 children, organized into seventy-four chapters the Atlanta members are striving to make the 1957 drive the best ever for "three years in a row" as top producers. According to Foundation Director Charlie Bynum, J. and J. raised more money in 1956 than any other Negro group anywhere. Of the $24,127.17 total, the Atlanta chapter reported $2,141.16.

PLANNING SESSION

Meeting this week with Mrs. R. C. Hackney, final plans were made for "Operation Remember Me" with the third annual Polio Ball set for Wednesday, January 30 at the Waluhaje Ballroom chairing this project is Mrs. J. R. Wilson, Jr.' while Mrs. P. Q. Yancey, chairman for the past two years continues as co-general chairman. According to these women and J. and J. president, Mrs. E. L. Simon, all officers and members have begun whole-heartedly to make this project the most exciting and rewarding of all time.

As in the past, a wide array of local and important talent will be showcased durnig the evening when aech entertainer will donate his services for the cause. All disk jockies are invited to participate and indicate a gala evening for attending friends.

Additional chapter efforts for the March of Dimes will include a benefit full length technicolor movie," "So Dear to My Heart" scheduled for presentation January 19, 2 p. m. at Ware Schol Auditorium. The public is urged to support the J. and J. girls (9-12 years of age) and all children are invited to attend.

Younger girls of the chapter will sponsor their third annual cookie sale and other age groups will offer a miscellany of efforts for the Fund.

All mothers of the chapter have accepted assignments for the Mothers March from J. and J. member, Mrs. W. O. Macomson, who heads the city-wide committee sponsroing the March.

Members of the Atlanta Chapter are Mesdames Marcus Beavers, M. G. Birchette William Boyd, B. R Brazeal, A. Russell Brooks, W. S. Cannon, Sr., Charles Chisholm, Norris Connally, P. D. Davis Kenneth D. Davs, G. E. DeLorme, Joseph [illegible] Charles Gebbs, R. C. Hackney, W. N. Harper, James Hayley, Jacob R. Henderson, Hugh Holmes, Dosh Jackson, Marque Jackson, Thomts Jarrett J. D. Kennedy, Cleveland Lyons, W. O. Macomson, A. J. Mickelbury, J Neal Montgomery, J. D. Neal, Frank Nelson William A. Scott, C. A. Scott, E. L. Simon, Charles Shorter, J. Russell Simmons, Peter Singleton, Arthur Smith, Harvey Smith Albert L. Thompson, Robert Wraren, James C. Washington, Samuel Westerfield; Plemon Whatley Charles Whatley, Roscoe White, E. B. Williams, J. R. Wilson, Jr., P. Q. Yancey, Rodriquez Yancey and Whitney Young.

Award $475,830 in grants to polio researchers, '38-'56

Afro American p. 5
Baltimore Md.

NEW YORK—The National Foundation for Infantile Paralysis last week announced in a statistical summary release that it awarded a total of 266 scholarships and fellowships, valued at $475,830.25, to colored persons from 1938 through 1956.

Sat. 1-12-57

Oddly enough, the summary shows that a greater number of women (more than double) won awards than men. Only 80 men were recipients as compared with 186 women. A breakdown of the statistics shows:

	Men	Women	Total	Amount
Medical Social Work	3	16	79	$110,429.00
Orthopedic Nursing		6	6	7,011.78
Health Education	2	10	12	15,320.71
Physical Therapy	23	83	106	146,234.57
Physical Therapy Teaching		1	1	2,900.00
Medical Research (for resident physicians)	15		15	9,497.69
Predoctoral	15	2	17	71,023.50
Post Graduate Medicine	22	8	30	113,413.00
	80	186	266	$475,830.25



JACK AND JILL GROUP SPONSORS POLIO BALL — Reading left to right front row: Mesdames Harriett Chisholm, Marian Scott, Alfred White, Dorothy E. Neal, Emistine S. Lyons, Margaret Young, Freddye Henderson; 2nd row: Grace DeLorme, Mexico Mickleberry, Betty Boyd, Juliette Jackson, Vivian Beavers, Clara Singleton, Irene Wilson, chairman of Polio Ball; Jewel Simon, president; Elizabeth Macomson; Back row: Lavada Smith, Roseland Days, Evaree Thompson, Ernestine Brazeal, Johnnie Yancey, Sadie Gaines, Jacquelyn Frye, Ruth P. Scott, Annabel Jarrett, Billie Davis, Beatrice Williams, Gertrude Hackney and Callie M. Montgomery. — (Photo by Lowe)

$44,034,000 Raised In 1957 March Of Dimes

Journal + Guide P. 10
Sat. 1-27-57
Daily World

NEW YORK — The 1957 March of Dimes raised a total of $44,034,000 last January for a continuing assault on polio and the lingering paralysis of thousands of its victims. Basil O'Connor, president of the National Foundation for Infantile Paralysis said that an important part of the funds will be used to bring maximum rehabilitation to those scarred by paralytic polio in past years. The needs of this far-reaching program will also be emphasized in the March of Dimes next January 2-31, he added.

"Years of research and the expenditure of millions of dollars have given us a powerful victory weapon in Salk vaccine," he said. "We are pledged to keep down the ranks of newly afflicted by seeing to it that every American under 40 seeks Salk vaccine protection."

* * *

HE EXPLAINED that the National Foundation's rehabilitation program, paralleling its sponsorship of medical research and professional education, had resulted in the discovery of dramatic new techniques and methods.

He said there were approximately 80,000 post-polio patients who could be benefited by the organization's rehabilitation services. Those crippled by other causes who could also benefit from the newly acquired knowledge and skills would reach into the millions.

"It is the destiny of this country-wide organization, with its resources in dedicated volunteers and medical know-how, to lead the way in new treatment approaches for htose disabled by polio and by other causes." Mr. O'Connor said.

He said there were approximately 80.000 post-poilo patients who could be benifited by the organization's rehabilitation services. Those crippled by other causes who could also benefit from the newly acquired knowledge and skills would reach into the millions.

1957 MARCH OF DIMES RAISED $44,034,000

World Wed. 1-17-57 P. 4
Birm. Ala.

NEW YORK—The 1957 March of Dimes raised a total of $44,034,000 last January for a continuing assault on polio and the lingering paralysis of thousands of its victims, Basil O'Connor, president of the National Foundation for Infantile Paralysis, announced Saturday.

Mr. O'Connor said that an important part of the funds will be used to bring maximum rehabilitation to those scarred by paralytic polio in past years. The needs of this far-reaching program will also be emphasized in the March of Dimes next January 2-31, he added.

"Years of research and the expenditure of millions of dollars have given us a powerful victory weapon in Salk Vaccine," he said, "but you just don't walk off the battltfield and leave your wounded behind. Furthermore, we are pledged to keep down the ranks of newly wounded by seeing to it that every American under 40 seeks Salk vaccine protection."

TECHNIQUE DISCOVERED

He explained that the National Foundation's rehabilitation program, paralleling its sponsorship of medical research and professional education had resulted in the discovery of dramatic new techniques and methods. These are now helping reclaim for society countless numbers of our fellow citizens who would otherwise spend idle years in hospitals or as heavy burdens

Marcia Beavers At Tuskegee March Of Dimes Conference

Marcia Jean Beavers, younger daughter of Mr. and Mrs. M. J. Beavers of 1206 Fountain Drive S. W., was invited by the National Foundation for Infantile Paralysis to attend the southeastern regional conference at Tuskegee Institute to orient campaign leadership for the 1958 March of Dimes. The conference held in two sessions, Dec. 4-5, and Dec. 6-7, devoted part of the program at both sessions to a discussion of Teens Against Polio. Marcia Jean was the only teen-age member of the conference, and her excellent presentation on the part that teens can play in the fight against polio was enthusiastically received by the audience at both sessions.

World P. 7
Atlanta, Ga.

Marcia is one of fifty-three teenagers from 28 states who met in New York City with the National Foundation for Infantile Paralysis for days last August 25-28th, to give their suggestions for promoting vaccination among this age group. Thirty-four national organizations participated in the naming of these teen-age leaders. Marcia Jean was named by Jack and Jill of America Inc. She is a freshman at Spelman College, president of the Southeastern Region of Jack and Jill Teens, and past president of the Keen Teens of the Atlanta Jack and Jill Chapter.

19g 1957

NEGRO DEATH TOLL HELD REDUCEABLE

New York Times

Anesthesia Professor Sees Need for Special Care in Surgery and Childbirth

Dec. 4-10-57

By JOHN N. POPHAM
Special to The New York Times.

TUSKEGEE, Ala., April 9—Deaths of Negroes under anesthesia and in childbirth, customarily two to three times the mortality rate for white persons, can be sharply reduced, a professor of anesthesia said today.

The professor, Dr. Robert A. Hingson of Western Reserve University Medical School, reported that in University Hospitals in Cleveland from Jan. 6, 1954, until midnight yesterday 4,984 Negro mothers had given birth "without a single anesthetic or maternal mortality of any kind during the hospital stay."

Dr. Hingson spoke at the forty-third annual meeting of the John A. Andrew Clinical Society at Tuskegee Institute.

27,000 Deaths Cited

"What this means," Dr. Hingson said, "is that the 27,000 Negro deaths last year in this anesthesia-childbirth category, though obviously a great reduction over the rate of loss in the past decade, were a serious but largely preventable drain upon our national treasure of human lives and potential skills."

About 500 physicians, medical teachers, research and clinical personnel, public health experts and nursing directors from thirty-eight states are attending the meeting. It promotes intersectional and interracial pooling of medical knowledge to help the needy sick of the rural South.

Possible to Reduce Deaths

"The fact that there is this difference in racial mortality rate is not something new," Dr. Hingson said, "but that we can now do something about reducing the shocking discrepancy is the new thing."

The medical profession, he said, is well aware that a major hazard in administering anesthesia to Negro patients is that the dark-skin pigmentation makes it difficult to recognize the appearance of cyanosis. This is the bluish coloration attending loss of sufficient oxygen under the anesthetic mask.

"The fact is," Dr. Hingson declared, "that anesthetic deaths can be greatly reduced by recognizing the hazard of the Negro's ability to camouflage cyanosis and by enriching the oxygen amount administered."



Associated Press
Dr. Robert A. Hingson

How Problem Was Met

Dr. Hingson said that the program evolved to meet this problem at Cleveland's University Hospitals, he is director of anesthesiology, called for a 40 per cent minimum in oxygen percentage whenever Negro patients were concerned.

The "normal" oxygen percentage for a white person under anesthesia is 20¢.

"This is simply recognizing the Negro's need for special attention," he said.

The University Hospitals accept all patients regardless of color.

As for the deaths in childbirth and other instances not directly attributable to anesthetic accidents, Dr. Hingson declared that the socio-economic conditions of Negro life developed psychological factors that subjected the Negro to a special stress under surgery.

Studies in South Africa, Jamaica and this country, he said, indicate that where the Negro experienced slum housing and inferior status, he tended to a racial melancholia, hypertension, cardiovascular crises and emotional convulsions.

Results of Poor Conditions

The results, he added, often were high blood pressure under anesthesia, contractions of the veins before and after insertion of a needle, sharp blood sugar increases and obstetrical convulsions, all presenting operative hazards.

"It is evident," he said, "that we must improve the socio-economic conditions around us if both white and Negro infants of the underprivileged segments are to be protected.

"And we must give special attention right now to creating climates of tranquility and acceptance for Negro patients in our care. That is the program in essence that gave us our success at University Hospitals."

Negroes still dying faster from pneumonia, influenza, and T. B.

Tribune, Wed 5-8-57 p. 14

Los Angeles Calif.

NEW YORK — Mortality from pneumonia and influenza is "about twice as high" among nonwhites as among whites, and at some ages, the nonwhite rate runs three times that of the white, the Health Information Foundation declared in its "Progress in Health Services" bulletin for April.

"At most ages and for each sex, the color differentials have widened since 1914 when mortality statistics by color and age were first available," the bulletin said.

"During the 1918 epidemic, however, white persons were the most severely affected."

Whites "at almost all ages" show a greater reduction in tuberculosis mortality than nonwhites, the bulletin also reported.

Tuberculosis mortality among white persons is only about one-third that among nonwhites, the Health Foundation noted.

19i 1957

Famed Nurse Of British Guiana Honored Here

BY

MRS. EDITH JACKSON PLUMP

The history of Miss Margaret Christina Nedd, registered nurse, reflects poverty, inequality and ignorance in her native British Guiana.

This fine public health nurse was recently cited by the Mary Mahoney Club (graduate nurses) of which Mrs. Corinne Jackson, R. N., is president.

Being one of a family of 11 children, born under the colonial system of British, French and Dutch Guiana, she knows from experience of the miseries and heartaches under such a regime where the few "rich gets richer and the poor gets poorer." She can relate hair-raising stories of how the natives are comeplled to work long and hard for unbelievably low pay and to travel long distances to work in the diamond, gold and silver mines, separated from their families for weeks and months. Their take home pay was bare pittance.

Due to such low wages, there was and still is, a wide prevalance of malnutrition, blindness and many other diseases resulting from dietary deficiencies and poor sanitary conditions as well as primitive and sub-standard housing conditions. These unpleasant problems fired Miss Nedd with a longing and a zeal to rise above her lot, to better her own station in life as well as to be able to lend a helping hand to her people.

While in her early teens, Miss Nedd was called to help a friend in the home of a "Dutch Landlord" who was reputed to be able to keep a servant more than a week. Fortunately she impressed her task-master aos being as neat and and promising. He hired and retained her for six years, paying her $3 at first and then raising her to $6, the largest amount paid to any Negro female domestic in the colony at that time.

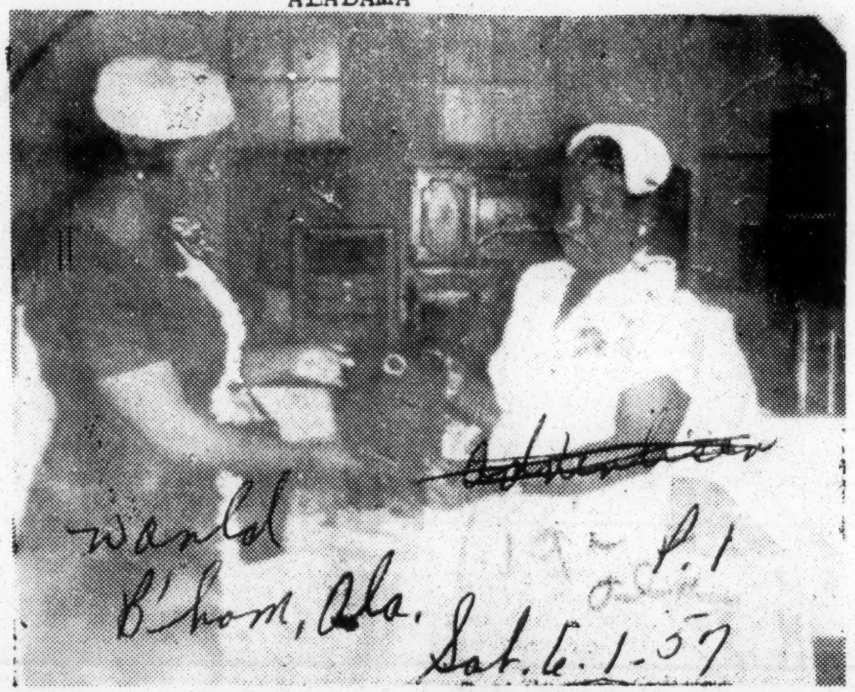
Having been taught the power of prayer, and the fear of God by her Christian mother, Miss Nedd prayed that God would help her to become a professional woman. She wore rags and saved her meager earnings toward the attainment of her aspiration, although shed had no idea it would come to pass.

By chance she heard about Tuskegee Institute from a minister from Morris Brown College, Atlanta, Ga. She asked his help in making application to Tuskegee Institute. He obliged and in about 30 days word came of her acceptance. Immediately efforts to secure a passport were started. Naturally her employer persisted in telling her that her efforts were futile. But her spirit and determination remained undaunted. Her mother had only prayer to offer, but gave her assurance that constant prayer and trust in God would bring the desires of her heart. The passport was granted. The money for sea passage and train fare from New York to Tuskegee was in hand with $5 to spare. But nothing at all for entrance fee. Hence when she finally reached her distination and the registrar's office penniless she faced quite a problem. But some how she had faith that these problems would be solved eventually. Some concessions were made in her behalf, which meant that she would have to work days and go to school at night.

She was assigned to the laundry although her preference was waiting tables. After a time, her work proved sufficiently satisfactory to warrant the special priviledge of working in the dining room, extra, along with all of her regular assignments. After three years Miss Nedd finally had $280 in the school treasury, the amount needed to complete the first and second year normal.

Due to a continued lack of funds she decided to switch to nurses' training which offered a brighter future for one fraught with certain handicaps and at the same time gave her a golden opportunity to serve humanity in a more tangible way.

Miss Nedd says that this was one of the wisest decisions she has ever made. As her long years of service to her neighbors, aside from her regular work, is one source of her happiness. She was graduated from the Tuskegee School of Nursing in 1928 and was given a trip New York City a lady friend, also a native of British Guiana who was making her home in New York. It was while there that she took a job as maid to a "movie actress" in order to pick up some much needed funds for uniforms; and other items to be ready when that first all important call came for nursing duty. In about six months while still working as a maid in New York, Miss Nedd received job offers from Birmingham and Montgomery.



HONORED BY NURSES — Miss Margaret Christina Nedd (right), 28-year service Registered Nurse with the Birmingham Health Service, receives a citation from Mrs. Corinne Jackson, R. N. (left), president of The Mary Mahoney Club. Miss Nedd is a graduate of the Tuskegee Institute Nursing School.

As result of a medal she received from writing a theme paper entitled, "The History of Nursing" while a student at Tuskegee, she accepted the position as staff nurse with the Birmingham Public Health Service in 1929, where she is still employed.

After 16 years, Miss Nedd made her first and only visit home for three months in 1937. Her mother had passed on while she was a student at Tuskegee. But she found most of the members of her large family still burdened with poverty and disease. Although she had been sending help back as much as possible ever since she began working. One year after her memorable visit, Miss Nedd became a United States of America citizen and has since brought over and educated two of her relatives. One finished Tuskegee Institute with the A. B. S. degree and the other is in the service of his country, stationed in Japan. Both relatives have become U. S. A. citizens.

Miss Nedd's generosity extends beyond the bounds of her family. She is family nurse to all of her immediate neighbors without pay, of course. One outstanding "helping hand" service worthy of mentioning was extended to a neighbor family's little girl who showed latent music ability. For more than a year she paid for, took the child to and from practice to a friend's house as well as to her music lessons. Today this little girls shows bright promise as an accomplished musician and proudly boasts for being the junior pianist for her Sunday school.

Miss Nedd is an ardent and faith ful member of the St. Paul Episcopal Church pastored by the Rev. J. Clyde Perry. Her pastor paid high tribute to her as being among his most loyal and trustworthy members, he said that her faithful friendship indicated her love for God, her church and her neighbors. The same can be said of her in line of duty as "an angel of mercy" and as a friend. Through her high aspirations and strong fortitude she has indeed risen above her handicaps and has carved a name and place for herself in this great land of opportunity. She has lived to see many of her dreams come true and to enjoy the fruits of her labors.

Here is a life worthy of emulation and many friends and associates join in saluting Miss Margaret Christina Nedd for her outstanding accomplishments and wishing for God's continued benedictions

Scripp hospital in La Jolla hires first Negro nurse

Scripps
La Jolla, Calif.
Jan 25 1957

SAN DIEGO—Exclusive: Scripp hospital in LaJolla has hired its first Negro registered nurse.

She is 1957 Tuskegee Institute graduate Vivian Phillips, 21, daughter of Mr. and Mrs. Floyd Cokman, of Gladsden, Ala.

191 1957

D.C.

Surgeons Award Miss Ruth Addams

Miss Ruth Addams, deputy director of nursing service for Veterans Administration in Washington, D. C., was honored by the Association of Military Surgeons of the United States at the group's annual meeting in the nation's capital October 28-30, 1957.

The Major Louis Livingston Seaman Prize, given annually for an outstanding article published in the Association's journal, "Military Medicine," during the preceding year, was awarded to Miss Addams for her article: "The Care of Long Term Patients — Studies on Intermediate Bed Services."

The prize was a scroll and an honorarium of $160. The award check was given by Miss Addams to the Ruth Weaver Hubbard Foundation in Philadelphia, which provides scholarships in public health nursing.

SURVEY FINDS U. S. SHORT OF NURSES

Vacancies in the Non-Federal General Hospitals Said to Average 14% in '56

Although there has been a slight increase in the total number of professional nurses in the last two years, 14 per cent of all full-time professional nursing positions in non-Federal general hospitals were vacant in 1956.

This was an average of 7.5 full-time vacancies for each institution surveyed, the American Nurses Association reported in its 1957 edition of "Facts About Nursing," just released. The data came from questionnaires answered by 484 hospitals.

It was estimated by the association, the National League for Nursing and the Public Health Service that about 430,000 professional nurses were employed in the United States in January, 1956, compared with 401,600 two years earlier.

This represented an increase of 7 per cent in the number of employed professional nurses and raised the ratio of nurses to the population by 3 per cent. The report noted that in January, 1954, there were 251 professional nurses for each 1,000 population, and in 1956, there were 259 for 1,000. To bring the ratio to the desired level of 300 for each 1,000, 70,000 more professional nurses would be needed.

Psychiatric Lack Cited

The highest vacancy rates were found to be in state or local government hospitals and in hospitals in the Middle Atlantic States.

The 326 psychiatric hospitals reporting showed vacancies of 3,189 full-time and eighty-eight professional nursing positions. Most drastic shortages were reported in the Middle West, where 40 per cent vacancies in total full-time positions were listed by twenty-five responding hospitals.

Of these psychiatric hospitals, the 207 controlled by state or local governments reported the highest percentage of vacancies in both full and part-time positions.

Although 46,498 students were admitted to basic professional nursing schools in 1955, the largest number in the last ten years, the report showed that about one-third of the students withdrew from the courses before graduation.

A report on faculty salaries in schools of nursing showed that the median annual salary was $4,140 in 1956. Wage surveys in 763 schools of nursing showed that salaries increased according to the amount of education of faculty members.

Need 600,000 Nurses By '70, League Told

By The Associated Press.

CHICAGO, May 6 — A study indicating the nation will need from 600,000 to 700,000 nurses by 1970 was presented today at a convention of the National League for Nursing, Inc.

The nation now has an estimated 430,000 professional nurses, a ratio of 258 to every 100,000 persons.

The study said the ratio of nurses to population should be increased to 300 to 350 per 100,000 population "in view of the many nursing positions that remain vacant, the hospital services curtailed for lack of professional nurses and the needs to expand nursing service in public health, industry and other fields."

NURSES HONOR PIONEER MRS. LUDIE ANDREWS

By GEORGE M. COLEMAN

Forty years ago today a small group of Negro nurses, trained by a well known Atlanta woman, went on duty for the first time in Grady Memorial Hospital as part of a county force to save lives and relieve suffering among people in this locality.

It was this day, a few months before our nation became involved in the first world war, that this group, trained on the campus of Spelman College by Mrs. Ludie Andrews, began official duties as public servants.

What that group started, and the record of those who have followed is a matter of history to be reviewed by those who would become sisters of mercy.

And though itwill be a brief two hour long remembrance, fitted into the endlessly busy schedule of our county hospital's routine, nurses at Grady will hon r their 40th anniversary this afternoon between the hours of 3 and 5 p. m.

The memorial is a tribute to a school that has graduated 1,037 students, and which boasts successful people in many parts of the United States and the armed forces.

Medical officers feel the celebration should be much larger, but there just isn't time. . .For the nurses it is more of the same old story.... The sick are still with us.

BRIEF ANNIVERSARY NOTE

Actually there will be a short program and cutting of an anniversary cake, and then more work on the busy wards. A few graduates are expected to attend. Not very many for their work will hold them at their various stations.

The program will open with greetings to the student body. A great p rtion of the affair will consist of renditions by the school glee club, under the direction of Joseph A. Stephens. The program will close with a tea.

Miss Francis Hammett, Director of Nursing at Grady explained how the Negro nursing school was actually begun by Mrs. Andrews, who at present makes her home at 155 Ashby Street, N. W.

Miss Hammett said that Mrs. Andrews, a registered nurse, was commissioned in 1914 by the Board of Trustees of the hospital authority to setup a municipal training school for colored Nurses. Up to that time only white nurses worked on public hospital wards.

Mrs. Andrews started her classes at Spelman College, where she was already employed as dispensary nurse. In 1915 she designed a cap for her students to wear. This same cap is worn today by the Negro Grady nurse.

FIRST SUPERINTENDENT

It was three years, later on Oct. 27 1917, that the Municipal Train-School for C lored Nurses was chartered. Mrs. Andrews was appointed as the first superintendent, and held this post until 1922.

The success of the school over the years can be seen in the continued interest graduates take in its welfare. One alumni group, located in New York City, contributes to the school and gives scholarships. Groups in Tuskegee, Ala., and Detroit, Mich. are also active. Miss Hammett said she meets graduates of the school at nearly all conventions she attends.

Those taking part in the program today will include, Miss Hammett; Mrs. Margaret Citrenbaum, Director af Education of the Nursng School; Mrs. Inez Stanley, supervisor of surgery of ward 6 and 7, and president of the Alumnae Ass.ciation; Miss Alice Simpson, matron of the Piedmont Home; Mrs. Julia Gilbert, matron Butler Street Home; and Miss Ethel Harris, president of the student council.

The ceremony will be short. About 200 are expected to attend. The speeches will be timely and the memory touching .... and then the nurses will go back to the busy wards where they will chalk up more enviable records, and send more graduates into a mal functioning world that needs them so very much.



FOR FORTY YEARS OF SERVICE — Miss Ethel Harris, Mrs. I. C. Stanley, and Mrs. Ludie Andrews (left to right) representing Grady Nurses of the future, present and past, join in cutting the cake symbolic of the 40 years that Nurses have been training at the Grady Memorial Hospital, Mrs. Andrews, who trained the first group of Nurses to go on duty, delivered the anniversary address Sunday. Mrs. Stanley is president of the alumni association, and Miss Harris is president of the presen' tudent body. — (Perry's Photo)



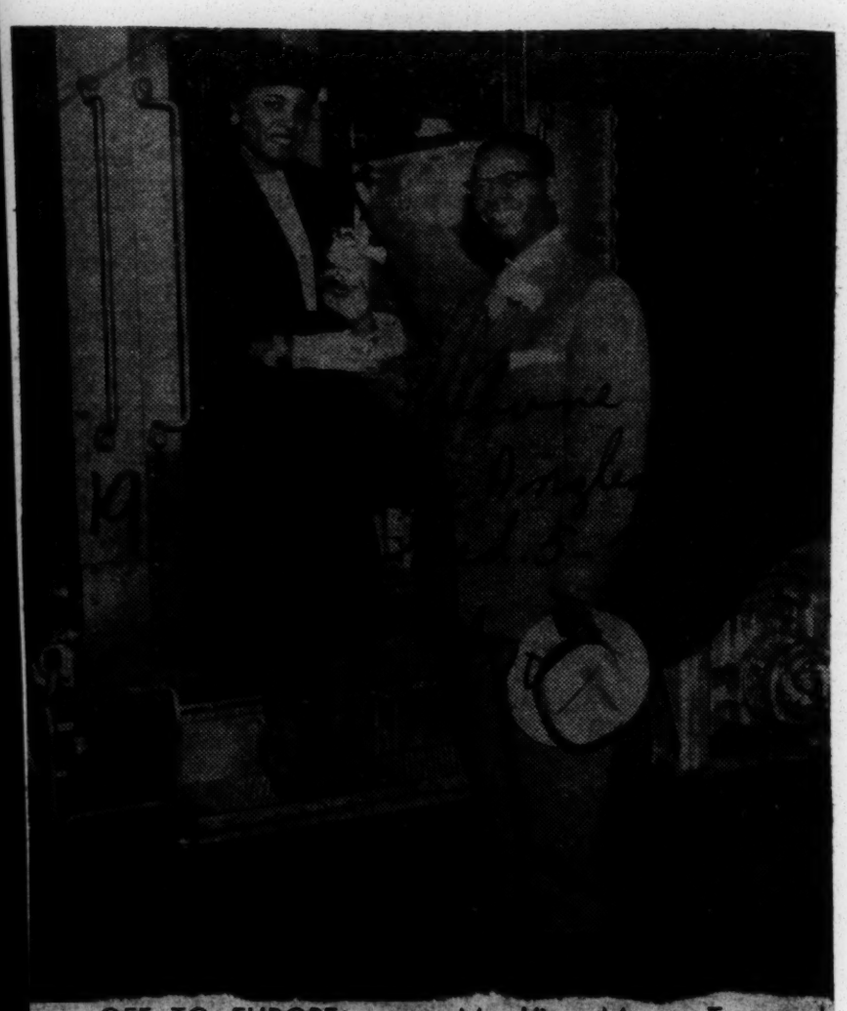
S BELVA OVERTON'S rait is admired by murs- colleagues and classmates nnual Homecoming ban- of the Provident Hospit- rses Alumni, held this s a Tribute to Miss . Graduated from the nt School in 1916, Miss n served the hospital 45 on various nursing cluding superintend- ent. Unable to attend banquet because of illness, Miss Overton was honored by the alumni whch included, left to right, Miss Betty Gross, Director of nursing at Provident, Mrs. Margaret Grossley, alumni president; Mrs. Ethel McEween, Provident nursing supervisor, and Mrs. Martha Cuff Brown, a classmate of Miss Overton.



FIRST MALE NURSES hired by Chicago's Provident Hospital are also first males to graduate from hospital's 66-year-old school of nursing. Arthur Goode Jr. left, of Asheville, N.C., and John Aaron Jr. of Little Rock, Ark., check anaesthesia equipment with assistant Director of Nurses Christine Betteis of Kansas City, Mo.

19i 1957

INTERNATIONAL NURSES CONFERENCE



OFF TO EUROPE — goes Mrs. Vince Monroe Townsend, Jr. to attend an international (nurses) meet in Rome and to tour other parts of the continent for two months. She is shown being bidden goodbye by her husband, a Los Angeles lawyer.

191 1957

IOWA

D. M. Girl to Graduate from University Of Iowa's School of Nursing in August



MISS MINTA LA VERNE SMITH

Miss Minta La Verne Smith, daughter of Mrs. Dorothy Cherry, 842 Sixteenth Street, will be graduated from State University of Iowa's School of Nursing in the August class. She was a graduate of East High School in the class of January 1953. (Read highlights of her interesting, active and challenging college career in a letter to Personal Touch in this edition)

19i 1957

KANSAS

Retires Following Fifty Years of Servide At Douglass Hospital; Receives Citation



T. Roosevelt Butler, Secretary of the Hospital Board, presents 50-year pin to Mrs. Frances E. Booth, R. N., December 15, 1956.

Kansas City, Kans.—Friends of Mrs. Frances E. Booth, R. N., gathered in the hospital dining room Saturday, December 15th, the effective date of her retirement from active duty. While voices were charged with emotion; there were no tears. There was a joyful atmosphere, created the beautiful Christmas centerpiece, the three-layer cake trimmed in gold letters with the inscription: 50 years of Faith and Faithfulness; and the gold trimmed money tree bearing silver dollars for the honoree. A beautiful Poinsetta given by Nathan Thatcher, Sr., was a part of the window decorations.

Ministers present, included her pastor, the Rev. O. A. Crenshaw of the Olivet Institutional Baptist Church, who gave the invocation and a talk on the value of her service to the community; the Rev. J. Russell Brown, pastor of First A. M. E. Church, and treasurer of the hospital, who served as the master of ceremonies. When Dr. Brown asked Mrs. Booth, how much salary she received when she began her work in 1906, she replied: twenty dollars per month. Other speakers were: Miss Frances E. Kitchen, R. N., who is a former student, now superintendent of nurses, who gave an interesting talk as she recalled many incidents during the long period of their association. Eugene H. Kelly, Jr., administrator of the hospital stated: "This is not an ordinary event. For few persons will be given opportunity or the privilege to be identified with an organization or an institution for a period of fifty years. While each joy in the hospital organization is important; nurses carry the brunt of responsibility for the welfare of the patient. They are like 'guardian angels' as they follow the directions and orders given by the doctors." The highlight of the program was the citation prepared by a committee appointed by the board of trustees and read by T. Roosevelt Butler, secretary. It read: "In your more than fifty years of service at Douglass Hospital, you have touched many areas of hopsital and community life.

"Many times, you have gone beyond the line of duty in giving consolation, comfort and surcease to countless number of patients who have been under your care in this half century of service. In recognition of this fact, we the members of the board of trustees of Douglass Hospital, take this butions as aforesaid stated and we commend you for the same. occasion to attest to your contri- On the occasion of your retirement, we wish you to know that you carry with you, our very best wishes and our prayers for long and continued happiness." Mr. Butler presented a service award pin, which bears the official insignia of the American Hospital Association with the inscription: "Service to Humanity." The figure "50" appears at the bottom of the pin. Following the presentation, Mr. Butler presented the "money tree" with its gold wrapped dollars.

Organ music was played on the portable, a part of the hospital chapel equipment, by Mrs. Jesse Hope, a former employee, now serving in the office of the sheriff of Wyandotte County. Miss Mariella Gentry, a teacher, sang the Lord's Prayer and the group sang Christmas Carols.

George Anderson Booth, husband of the honoree, her daughter, Lillian and her husband John Eason, and their two children were special guests. Groups present were the Nurses' Alumni, the Home Beautiful Art Club, and the Douglass Hospital Auxiliary. Refreshments were served by the dietary department as supervised by the dietitian, Mrs. Irene Taylor. Other committee members responsible for the program are: Mrs. Olivia Gentry, accountant; Miss Kitchen; Mrs. Benella R. Lee, housekeeper; J. J. Parks, chief engineer and the employees in their departments.

EHK:lp

10 of 13 Ky. nurse training programs lower color bar

FRANKFORT, Ky. — Ten Kentucky educational programs which train 68 percent of Kentucky's professional nursing students are accepting colored students, according to a report by the Kentucky Council on Human Relations.

Forty-seven colored students are enrolled in seven schools, constituting 3.9 percent of Kentucky's 1,205 nurse students.

This compares with the 6.9 percent of Kentucky's colored population.

The Council report was prepared for circulation to Kentucky high school principals and others counseling colored students.

According to the report, 4,700 additional professional nurses are needed in Kentucky. Three nurse training schools do not admit colored students, but one of these has the matter under consideration.

* * *

THE COUNCIL reported that five of Kentucky's seven practical nurse training programs are "open" to colored and white students, but only two of these have actually admitted colored students.

In addition, the report said that 54 out of 139 general and short term hospitals in Kentucky will not exclude patients on the basis of race, creed, or color, although many of them segregate within the hospital.

These hospitals have 57 percent of the general hospital beds in Kentucky.

The report was prepared by the council's executive director, Galen Martin. Dorcas Ruthenburg, Louisville, is the recently elected chairman of the council which is affiliated with the Southern Regional Council of Atlanta.

* * *

KENTUCKY educational programs for professional nursing students open to white and colored students are:

Bera College, Bera; St. Elizabeth Hospital, Covington; Nazareth School of Nursing, St. Joseph Hospital Lexington; Louisville General Hospital; Nazareth College, St. Anthony Hospital, St. Joseph Infirmary, S.S. Mary and Elizabeth Hospital, all of Louisville, Morehead State College, Murray State College.

The faculties of Nazareth College and Joseph Infirmary are desegregated.

* * *

PROGRAMS reported to be open to colored students are:

Good Samaritan Hospital (H B), Lexington; Kentucky Baptist Hospital, Louisville, and Norton Memorial Infirmary (H-B) of Louisville.

(Editor's Note: (H-B) designates programs in hospitals which have agreed to admit persons regardless to race, creed or color.)

Educational programs in practical nursing open to white and colored students are:

Glasgow School of Practical Nursing: Central State Hospital, Lakeland; Red Cross Hospital, Louisville; Mayo State Vocational School, Paintsville; and Miners Memorial Hospital Association, Inc., South Williamson.

Schools reported to be open to colored students are Kentucky State Hospital (anticipated to be open at an early date) of Danville and Applachian School of Practical Nursing, Lexington.

PRACTICAL NURSES ARE VALUABLE ASSETS IN OPERATIONS OF LOUISVILLE HOSPITALS

Over the years, with the increased number of patients and hospital duties, the practical nurse has come into her own as a valuable asset in the over-all operations of the nation's hospitals.

It now takes a year's extensive training and state certification before a practical nurse can assume the duties of her profession. Neither training nor time, however, can measure the worth of the practical nurse. As many and as varied as her duties are, she dispatches them with zest and devotion.



One of the duties of Mrs. Cowden is to give skin tests as the physician in charge directs. Above, she is administering the test to Lois Winebrenner, daughter of Mrs. Mary Winebrenner of 612 W. St. Catherine, a patient in the children's ward.

Typical Practical

Mrs. Elmer Cowden, a practical nurse at St. Joseph's Infirmary, is perhaps typical of the practicals now working in the hospitals of Louisville.

"I just love my work. There is something new to learn each day," were the recent words of Mrs. Cowden in describing her duties and how she felt about her job.

Mrs. Cowden, who is also the mother of 3 youngsters, works in the treatment room of the children's ward of the hospital. Because of her love for children, her job is much easier. "Contrary to popular belief," said Mrs. Cowden, "most children are different and each child case presents something new."

A native of Louisville, Mrs. Cowden attended grade school here and is a graduate of Central High School. "Originally," confided the nurse, "I wanted to be a physical education teacher, but I wasn't able to attend college."

Read Advertisement

In 1954, after reading an advertisement in the Defender, requesting women for practinal nursing training, Mrs. Cowden enrolled in the course at Red Cross Hospital. One year later she graduated and was licensed by the Kentucky Board of Nursing Registration.

Prior to joining the staff at St. Joseph's, she was a practical nurse at Red Cross and also for Dr. Milton Yohng.

In the past many persons have associated the duties of the practicals as being menial and that any one could do the job. To the contrary, the practical nurses position is an exacting one with countless responsibilities.

The treatment room is located in the middle of the children's wing of the hospital. Patients are brought in, if possible, to be prepared for treatments, which is one of the duties of Mrs. Cowden.

Other duties consist of giving skin tests, assisting in spinal taps and drawing blood plus assisting where needed the doctors and registered nurses. In addition she also works for some periods on admissions of new patients. checks oxygen each morning and assists at blood exchanges.

On arriving at work, she first checks the treatment schedule on the bulletin board. She then checks with the physician on duty for additional information of up-coming treatments. After this is done, Mrs. Cowden prepares the patient for the treatment. When treatment is finished, she makes a chart of the record of his treatments.

In the future, Mrs. Cowden has hopes of opening a day nursery. She revealed that she had always liked to care for children. Mrs. Cowden and her husband live at 5220 Monticello, and the entire family attends the Portland Baptist Church.



Another responsibility of the nurse is to check the oxygen each morning to see if it is ready for application if necessary. In the photograph above, she is checking the different valves on the oxygen in the treatment room.

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MARY E. MAHONEY
BOSTON,MASS. (1845-1925)

MARY E. MAHONEY

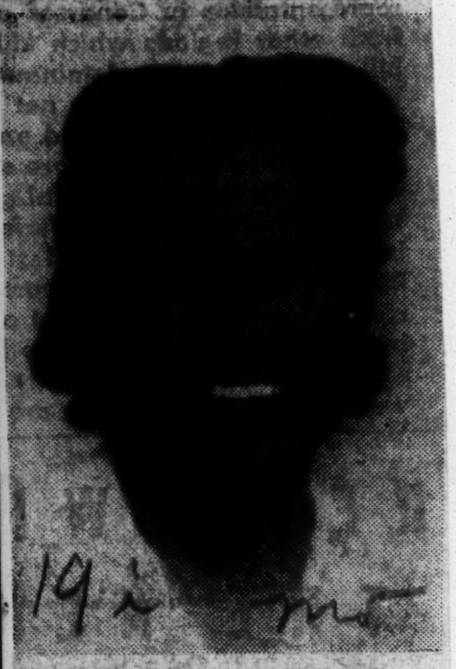
1845 -1925

First known professional Negro Nurse in the United States. Born, Boston, Mass., She went to the Hospital as a maid, was later accepted as a student and received her diploma in 1879. She won highest praise for her fight against color prejudice, her expert and tender care of the sick, her organizational work; and as a builder for the future. In her honor the MARY MAHONEY MEDAL was founded to be given,each year to the one who has made "AN OUTSTANDING CONTRIBUTION TO NURSING."

YOUR HISTORY
BY- J.A. ROGERS
Courier p.9
Sat. Dec.14,1957
Pittsburgh,Pa.



Mrs. Holness Will Be Atlanta's First Negro Nurse Anesthetist



MRS. MARIE J. HOLNESS

Daily World P. 3

ST. LOUIS, Mo. — Mrs. Marie J. Holness, who completes her post graduate work at hospitals here in September, will be Atlanta's first Negro nurse anesthetist.

Having already successfully passed the Missouri board, Mrs. Holness is now [illegible] American Association of Nurse Anesthetist and will return to Atlanta to practice shortly afterward.

A product of the Atlanta schools, she is a graduate of the Henry Grady School of Nursing and received her anesthesia training at Flint Goodridge Hospital of Dillard University and Charity Hospital, New Orleans, La., under Dr. John Adriani.

Mrs. Holness continued her training with post graduate work under Dr. Roy Boggs, Chief Anesthesiologist, Homer G. Phillips Hospital and City Hospital No. 1, here in St. Louis.

She is a member of Greater Mt. Calvary Baptist Church and the wife of Marcus Holness, a member of the staff of The Atlanta Daily World.



— NATIONAL OFFICIALS - - Ernestine Jones, standing third from left, a native of Houston and junior at Dillard University, was recently elected secretary of the National Student Nurses Association. Miss Jones, upon her election before more than 3,000 nurses, became the first Negro to hold a post with the organization. Other officers are Janet Corcoran of Newton Falls, Mass, president (seated); Virginia Weeks of Tacoma, Washington, first vice president; Clementine Sadler, of Richmond, Va, second vice president; and Jo Ann Van Moose of Warren, Ohio, recording secretary.



AWARD IN NEW YORK CITY — Miss Jessie Barnes whose home is in Reading, Pa. first ranking student in Scholarship in the May 1957 graduating class of 43 of Harlem Hospital School of Nursing — first also in the category as the best "All Around Nurse," and also first with the highest average in Medicine, won extra plaudits for writing the best Essay on "What I Expect to Accomplish in My First 25 Years of Nursing." Twenty-five silver dollars was the Prize presented to Miss Barnes by the 1932 Class President, Miss Birdie E. Brown, R.N. and one of the Ass't. Supt. to Mrs. Alida C. Dailey, Supt. of Nurses at Harlem Hospital.

Harlem Hospital Nurse Honored

World Sat. 6-8-57 P.4

NEW YORK CITY — (Global) — Mrs. Grace Jones, R. N., wife of T. Walter Jones, has won the distinction of being one of three who have received an Honorary Diploma from Harlem Hospital School of Nursing in recognition of excellent, unselfish service. This honor was bestowed upon Mrs. Jones by Mrs. Alida C. Dailey, Supt. of Nurses and Principal of Harlem Hospital School of Nursing at the School's Graduation Exercises last month.

Mrs. Jones is a graduate of Barnet Hospital of Huntington, West Va. in 1922 when Mrs. Clara Matthews Barnett, R. N., graduate of Lincoln was Supt. of Nurses there. After one year in Public Health Nursing out in West Virginia, she came to Harlem Hospital where in 1923 she became the first Head Nurse to be appointed. From 1928 to 1931 Mrs. Jones was Office Nurse to Dr. Peter Marshall Murray and James T. Granady. Mrs. Jones then went to Wiley Wilson Sanitorium where she remained until 1934. In 1936 she returned to Harlem Hospital as Charge Nurse in the Social Hygiene Clinic, and in 1941 when the "Call of Service" came as a result of World War, this brilliant and charming nurse taught Volunteer Nurses' Aides for the American Red Cross.

Because of the charm, training, excellent service and depth of understanding of one whose work in the various areas of Nursing had been noteworthy our Mrs. Grace Jones was selected as Director of the Nurses Residence in 1943 and has so remained for the past 14 years. All in all, Mrs. Jones has given more than 25 years of wonderful service to Harlem Hospital and the School of Nursing combined, and is indeed most deserving of the honor bestowed upon her as Honorary Graduate of Harlem Hospital School of Nursing.

Nurse Named To Board Of Examiners

Amsterdam News P. 19
Let. 7-20-57 New York

Mrs. Genevieve H. McKinney, a tall, bespectacled registered nurse of Brooklyn, has been unanimously approved by the University of the State of New York for appointment to the State Board of Examiners for Nurses.

The Illinois-born nurse, who lives at 499 Halsey St., will serve in that capacity, vacated by the resignation of Barbara R. Fallon, through the term ending June 30, 1960. At present, she is chairman of the Pre-Nursing Department of Brooklyn High School for Homemaking.

A pleasant middle-aged woman who has devoted most of her adult life to nursing or imparting her knowledge to the upcoming generation, Mrs. McKinney is believed to be one of the few women of her race to serve on the important nurses examiners board.

Name Submitted

The submission of her name was made, she said, by Mrs. Ruth W. Harper, executive director of the New York State Nurses Association, District 14, to Katherine Rehder, executive secretary of the State Nurses Association.

When one looks over the record of the quiet Brooklyn nurse, one can not but conclude that the submission of her name, and her consequent appointment, was based strictly on merit.

Before she reached full maturity in her Jacksonville, Ill., home, Mrs. McKinney asserted she had been interested in the nursing profession and had manifested that interest by receiving a basic education in that field.

After she graduated from the Lincoln School of Nurses here in this city, she attended Teachers College at Columbia University and received a bachelor of science degree in public health supervision. Later she was awarded a master of arts degree from New York University where she majored in physical education and personality adjustment.

Many years ago she became the first Negro supervising nurse in the city's Health Dept. where she was assigned to the central Harlem unit.

Once Staff Nurse

With over 15 years professional experience, she has served variously as staff nurse for the city's Public Health Service, as a nursing teacher for a decade and as acting chairman of the Pre-Nursing Dept. in Brooklyn High School for Homemaking.

As chairman of the school's nursing department, she supervises 18 teachers and some 750 students who are receiving instructions in nursing.

"The opportunities in nursing are, at present, wide open," the graying registered nurse said. "There's a great demand for nurses and if a girl has the qualifications she has no obstacles to surmount in realizing her ambition."

Some of these qualities a nurse must have are a sound education, good health, dependability, patience, cheerfulness and a sense of responsibility, said Mrs. McKinney.

Most of Mrs. McKinney's time is spent in nursing and imparting her knowledge, so much so, she said, that she finds little time for other activities.

A member of Concord Baptist Church where she once organized a nurses education unity unit, Mrs. McKinney is also a member of the Nursing Bureau of the Brooklyn Chapter of the American Red Cross, the State Nurses Assn. and other professional organizations.

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NEW YORK



Honored By Hospital

Mrs. Grace Jones, R. N., right, was honored by Harlem Hospital School of Nursing in recognition of excellent, unselfish service. Mrs. Clara Matthews Barnett, R. N., former superintendent of nurses at Barnttt Hospital, Huntington, West Va., is at left.

Recognition Is Given For 25 Years Of Service

NEW YORK CITY — Mrs. Grace Jones, R.N., wife of T. Walter Jones, has won the distinction of being one of three who have received an Honorary Diploma from Harlem in recognition of excellent, unselfish service. This honor was bestowed upon Mrs. Jones by Mrs. Alida C. Dailey, supt. of nurses and principal of Harlem Hospital School of Nursing at the School's graduation exercises last month.

Mrs. Jones is a graduate of Barnet Hospital of Huntington, West Va. in 1922 when Mrs. Clara Matthews Barnett, R.N. graduate of Lincoln was supt. of nurses there. After one year in Public Health Nursing in West Virginia, she came to Harlem Hospital where in 1923 she became the first head nurse to be appointed.

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FROM 1928 TO 1931 Mrs. Jones was office nurse to Dr. Poter Marshall Murray and James T. Granady Mrs. Jones then went to Wiley Wilson Sanitorium where she remained until 1934. In 1936 she returned to Harlem Hospital as charge nurse in the Social Hygiene Clinic, and in 1941 when the "Call of Service" came as a result of World War, this brilliant and charming nurse taught Volunteer Nurses' Aides for the American Red. Cross.

Because of the charm, training, excellent service and depth of understanding of one whose work in the various areas of nursing had been noteworthy our Mrs. Grace Jones was selected as Director of the Nurses Residence in 1943 and has so remained for the past 14 years.

ALL IN ALL, Mrs. Jones has given more than 25 years of wonderful service to Harlem Hospital and the School of Nursing combined, and is indeed most deserving of the honor bestowed upon her as honorary graduate of Harlem Hospital School of Nursing.



Courier p. 16
Sat. 4-20-57
Pittsburgh, Pa.

IN DEMAND—The tremendous demand for nurses has been reflected at A&T College this spring. Recruiters from every branch of the armed services have been regular visitors to the college with the objective of procuring the services of those who will be the first graduates from the college's school of nursing this June. Lieut. Margaret L. Covington, left center, of the Navy Nurse Procurement Office, Raleigh, N. C., outlines opportunities for nurses with the U. S. Navy. Three of the prospective graduates are Miss Dorothy Chavis, Asheville, N. C., left, and right are Misses Ethel Wright, Gastonia, N. C., and Ranova Satterwhite, Bunn, N. C.



Defender.
Chicago, Ill.
Sat. 6-8-57
P. 12

ALL DECKED OUT in full white, the graduate nurse uniform, are the 15 young ladies who composed the first graduates in the A&T college School of Nursing, Greensboro N. C. They received their pins at the annual Field Day Exercises at the college last week. Mrs. Willetta S. Jones, dean of the school, presents the pins as Mrs. Naomi S. Wynn (right) assists.



$3,000 Award

Mrs. Lillian Lisbon Amis of 1112 Pine street, Durham, has received a $3,000 public health traineeship award. She will study in the graduate program at North Carolina College where she received the B. S. degree in 1955.

Mrs. Amis has been granted a leave of absence from the Carrollton City Schools, Carrollton, Ga. where she was a health coordinator.

Jack C. Haldeman, medical director, Division of General Health Services in the U. S. Department of Health, Education and Welfare, notified Mrs. Amis of her grand.

It was made possible under Traineeship Commission Grants of the Public Health Traineeship program under Title I of Health Amendments Act of 1956.

SREB CONFERENCE OPENS WEDNESDAY

Mental Health Nursing To Be Among Topics

Special to The Commercial Appeal

WAGONER, Okla., March 23.—Six Tennesseans are expected to attend the Southern Regional Education Board conference on Nursing Personnel for Mental Health here, beginning Wednesday.

Dr. Otto von Mering, anthropologist on the staff of the University of Pittsburgh Medical School, will be the keynote speaker. His address will deal with changing attitudes of the public, professional persons and hospital administrators as to the length of time patients spend in mental institutions.

More than 85 professional persons are expected to take part in the programs. The purpose of the conference is to find ways in which the Southern states can make better use of their nursing personnel in mental health programs and how the supply of such specially trained people can be brought in line with the needs.

Tennesseans expected to attend are Miss Eula Gould of Nashville; Mrs. Mary Scott Watkins, dean of the University of Tennessee School of Nursing at Memphis; Miss Sadie Reading of Chattanooga; Dr. Cyril J. Ruilmann of Nashville, commissioner of mental health; Mrs. Helen D. Rysan of Nashville, and Mrs. Phyllis Carns Weathers of Baptist Hospital in Memphis.

In Service Conference

PRAIRIE VIEW Texas — A conference for in-service school hospital and public health nurses will be held at Prairie View A & M College March 5-8 sponsored jointly by the college and the State Department of Health.

Nurse Back Home After Ending Work In Lebanon

Calif. Enq. 6-21-57 Kansas City Mo.

P.3

BEIRUT, Lebanon — (ANP) — Miss Mary Lee Mills, Chief Nurse of the United States Operations Mission to Lebanon, who has the title of lieutenant colonel in the United States Public Health Service, wound up her work in Lebanon last week.

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Miss Mills has been serving in Lebanon for five years and has done such an outstanding job in the development of the nursing school and nursing service here as well as serving as advisor to the Ministry of Health of Lebanon, that she has been awarded the Decoration of the Cedars by the government.

Delegate From N. C.

Miss Mills stopped by Rome, Italy on her way to the United States in order to attend the International Congres of Nurses which met there. She served as one of the delegates from the North Carolina Nurses association, having been duly elected to represent it along with several Caucasian nurses from the same state; 740 nurses from America attended.

A graduate of New York University in nursing education and holding a master's degree from that institution, Mary Mills began her profession at Lincoln Hospital in Durham, N. C. She served with the Public Health Department of North Carolina before she joined the U. S. Public Health. While serving with that organization she was sent to Liberia.

There, with the rank of captain, she was a factor in the organization of the excellent nursing school functioning there. She spent five years in Liberia and was awarded a decoration in the Order of the Star of Africa, becoming the first public health nurse to be decorated by two foreign governments.

Honored By Tuskegee

Tuskegee Institute recognized the work of Miss Mills during its 75th anniversary commencement last year when they bestowed an honorary doctor of science degree upon her. She had planned to pursue work on her doctorate at NYU this year instead of returning to work, but instead has accepted a grant to study Arabic at the School of Advanced International Studies at Johns Hopkins University.

First she will go to her home in Watha, N. C. to visit her parents and the two little Liberian boys whom she adopted and who live with her father and mother.

Lt. Col. Mills' portrait is one of those comprising the Harmon Foundation travelling exhibit of distinguished Negroes which has appeared in many cities and is available for showing throughout the country.

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ROBERT GILES HAS TOP ROLES IN PHARMACY

Daily Tribune
Art. 5-25-57
Chicago, Ill.
P. 7

He's First Negro Head of State Group

BY ROI OTTLEY

Dr. Robert E. Giles, a prominent south sider who recently became the first Negro president of the Illinois pharmacy examining committee and the first to be appointed to the state medical board, has operated for 36 years a State st. drugstore which has become a community landmark.



Dr. Giles

He also was the first Negro elected convention chairman of the National Association of Boards of Pharmacy in 1956, and was the first Negro to receive the National Pharmaceutical association's Chauncey I. Cooper award.

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Governor's Adviser

Dr. Giles, who has served on the Illinois pharmacy board seven years, is associated with the wholesale drug company, Humiston & Keeling, as an adviser to physicians and druggists on the use and content of new drugs.

As president of the state pharmacy board, his duties involve examining applicants seeking to become registered pharmacists to decide whether they qualify to entrust the public's health to them, and holds hearings on alleged infringements upon the state's pharmacy laws.

Dr. Giles was born in Maysville, N. C., near Raleigh, on June 25, 1889, one of six children. He was reared in Asbury Park, N. J., where his father, William H., was a minister of the African Methodist Episcopal church.

Joins an Orchestra

Young Giles attended elementary school in Asbury Park, and the Neptune Township High school, Ocean Grove, N. J., where he was the only Negro member of the orchestra. His talent as a trumpet player ultimately was to enable him to finance a college education, profession, and business.

In fact Dr. Giles came from a musical family. Both his mother and father played the organ, bought instruments for their children, and provided them with formal musical training.

When young Giles enrolled at Howard university, Washington, D. C., he joined his three brothers in forming a nine piece orchestra.

Migrates to Chicago

He was graduated in 1907 with a B.S. degree, and in 1910 was awarded a Ph. A.R. degree. Meantime his brothers also had acquired professions: Charles E. as a physician; William D., a dentist; and George, a minister and presently assistant pastor of Metropolitan Community church.

Dr. Giles soon migrated to Chicago, where he joined Erskine Tate's orchestra. He earned sufficient money in four years to launch himself in business in 1920.

Dr. Giles, a member of the National Pharmaceutical association and Chicago Pharmacists association, has been married 42 years to the former Irene Bell. They have a daughter, Dorothy, who is the wife of Dr. Lucius Wimby, and two grandchildren.

Dean Accepts Bid To Drug Seminar

Defender Chicago, Ill.
Sept. 28-Oct 4 1957

HOUSTON, Texas — Hurd M. Jones, jr., dean, Texas Southern university School of Pharmacy, has accepted an invitation to participate in the third Walgreen seminar in pharmacy administration.

Sponsored by Walgreen Drug Stores in cooperation with leading colleges of pharmacy, the seminar is unique to the drug field.

Its aim is to enable educators to introduce more actual business basics into the pharmacy curriculum, better preparing students for successful drugstore management.

The seminar will be held at the firm's Chicago headquarters June 24-July 12. It will be attended by deans and professors in pharmacy administration from 12 of the nation's leading colleges and universities.

They will be given an on-the-scene working knowledge of modern retail drugstore fundamentals by actively participating in discussions and field trips through the many phases of Walgreen operations.